

THE AMERICAN JOURNAL OF NURSING

VOL. XXI

JULY, 1921

No. 10

EDITORIAL COMMENT

TRIBUTES TO MISS MAXWELL

We should like to add our modest word to the chorus of appreciation which is being uttered just now on the occasion of Miss Maxwell's resignation from the post she has held so long, that of director of The School of Nursing of the Presbyterian Hospital, New York.

There are some people who do excellent work in a corner and who are never well known. There are others who do notable and well known work,—work which tells,—who are yet so narrow in their human sympathies that though they are applauded for what they accomplish, they are not personally widely known, nor widely loved.

Miss Maxwell has not only done a great work in her own school, and in her own state, but she has had the most catholic interests and has made her mark on national and international affairs. Her wide acquaintance outside nursing circles has made her an interpreter of our needs to those outside and she has won support and interest for many a cause which would have languished without her vigorous championship. In the early days of the Superintendents' Society, of the American Nurses' Association, of the Journal, of the course in "Hospital Economics", of the Robb Scholarship Fund, and of the International Council of Nurses, Miss Maxwell was one of the workers, and that means that she did work, that she gave hours and days and weeks of service in the midst of her other cares and duties. Much that we now enjoy is the result of her effort, combined with that of others, for she is a good co-worker, not desiring to play the game alone nor to take all the credit. For that reason she has been loved as well as admired.

We are glad to give our readers the good picture which is inserted as a loose leaf in this issue and the article written by one who desires that her tribute shall be anonymous.

We join, and we know our readers will join, the many who know Miss Maxwell best, in wishing her many years yet of active, useful life, a continuation, in a little different way, of her work in the past.

A SUCCESSFUL RECRUITING CAMPAIGN

We believe that every well written account of a good recruiting campaign is of service to some community which is just beginning the work and we are, therefore, glad to give a summary of the work done in District Four, Ohio, of which Cleveland is the center. The Red Cross posters and literature used in this campaign are available for any community; they may be obtained through the nearest Division Office.

The Student Nurse Recruiting Movement in District No. 4, Ohio State Graduate Nurses' Association, is being carried on under the supervision of a General Committee composed of representatives from the Lake Division and local chapter of the American Red Cross, governing boards of hospitals having recognized nurse training schools, superintendents of hospitals, principals of hospital training schools, the Academy of Medicine, District 4 of the Ohio State Graduate Nurses' Association, Board of Education, Chamber of Commerce, Welfare Federation, City Board of Health, Federated Churches, Federated Women's Clubs, and the Central Committee on Nursing. From the General Committee an active Executive Committee has been selected, headed by a nurse, as chairman. Financial support of the effort is given through the medium of the Red Cross, the Central Committee on Nursing, and District 4. Office headquarters have been established in Cleveland Nursing Center, with an Executive Secretary in charge. District 4 comprises four counties outside of Cuyahoga, and in these four counties, local chairmen have been named and asked to select their own committees.

The initial effort in District 4 was to prepare for a week of intense publicity, primarily to bring before the public the educational advantages now offered by recognized schools of nursing and the many and varied opportunities open to the graduate nurse,—the *demand for*, rather than the *shortage of*, nurses being emphasized. The Publicity Movement took the form of press notices in 70 different newspapers throughout the counties. The *Cleveland Plain Dealer* stood out prominently with a full page in the Women's Department on Sunday, April 24th, and a first column editorial mention of the Nurse Recruiting Movement. This was followed on Monday by one of Donahy's front-page cartoons, and throughout the week daily mention of the Publicity Movement.

Through the medium of the Standard Film Service Company the films "Following in the Footsteps of Florence Nightingale," and "The Making of a Nurse," were shown in 43 of the moving picture theatres of Cleveland.

Mary E. Gladwin, engaged as a special speaker for the State Recruiting Movement, was given to District 4 for a period of two weeks, and during that time she filled 35 speaking appointments in Cuyahoga county, classified as follows: Clubs 7, City high schools 9, County high schools 9, Catholic schools 6, Colleges 2, Private schools 1, Commencement exercises 1.

Reports from the four other counties indicate that Miss Gladwin spoke to 13 different groups, making a total of 48 groups. In Cuyahoga county, six speeches were given by miscellaneous speakers, making a grand total of 64 talks in District 4.

Literature distributed was as follows: 1091 posters, "Complete Your Education"; 6200 pamphlets, "Challenge to the Young Women of America"; 800 reprints Miss Wheeler's article, "The Profession of Nursing"; 100 copies, "The Foster Mother of the Race".

Special features brought out in Cleveland during publicity week were: (1) The contribution, by the Cleveland Trust Company, of their bulletin board at the corner of 9th and Euclid Avenue, for the period of the publicity week, bearing an attractively worded inscription in the interest of the Recruiting Movement. (2) The establishing of a first-aid station at the same corner during the noon hour for two consecutive days. The nurses who served at the station, and the equipment, were supplied by the Visiting Nurses' Association and by the different hospitals. (3) Four of the Loew moving picture theatres gave free admission to young women who were interested in the nursing profession and who wished to see the nurse films shown at their theatres. (4) On Friday afternoon, the Hospitality Committee of St. Barnabas Guild gave a tea to high school students in the Guild room at Cleveland Nursing Center, 2157 Euclid Avenue. (5) A pupil nurse in uniform accompanied Miss Gladwin to all high school and college groups. The nurse distributed literature and answered such questions as the students might ask as to why she entered a training school, etc. The pupil nurse proved to be an attractive feature of the campaign.

At the close of one month, following the intensive publicity week, results statistically were: Names and addresses on file in the recruiting office, of girls interested in the nursing profession, 277 (these were direct results of Miss Gladwin's talks); young women who have made personal application to the recruiting office for information, 33; inquiries by mail, 14; making a total file of 324 names.

Principals of training schools vary in their reports of results of the Publicity Movement. Some report a decided increase in inquiries, while others note no increase. As a whole, they agree it is too early yet to judge results. Interviews in the recruiting office do not take the form of recommendation for any special hospital. The applicant is given general information concerning the profession of nursing, literature, a list of the accredited schools in the state of Ohio, and is advised to see the principal of not one, but several, training schools before she makes a final decision.

Whatever the tangible results may be, the Committee of the Recruiting Movement feels that if interest in nurse education is aroused and stimulated, the efforts put forth will have been worth while. The Recruiting office in the Nursing Center will be kept open during the summer months and tentative plans for another publicity drive for the autumn are under way.

HOSPITAL DAY

"Hospital Day", a new institution, was observed generally throughout the country on May 12, Florence Nightingale's birthday. Hospitals and training schools kept open house, and many lay people who are not familiar with the workings of such institutions took advantage of the opportunity to see for themselves what they are like. In many places, public meetings were held and addresses were given. It was an excellent opportunity for showing the contributors to these institutions how their money is used, and the need for continued support. It was also an indirect but effective way of recruiting more students.

Nothing is so good as publicity for a well conducted organization which keeps no skeletons in its cupboards. We believe that if the custom of Hospital Day is continued, year by year, it will have a

great and good effect in bringing lay and medical people together on common ground.

A WONDERFUL GIFT

All who know of the work done by the Henry Street Nurses' Settlement in New York City, and who does not? will rejoice in the knowledge that a central building is to be erected through the gift, by Mrs. Jacob H. Schiff, of \$800,000. The building will be centrally located, at the corner of 40th Street and Park Avenue; it will house the executive staff and will be the center for records. The original house, 265 Henry Street, where the work was first established, more than thirty years ago, will still be used as an active headquarters, but as branches and branch offices have been gradually established and extend all over the city, it will be better to have more central offices, especially as these will be more accessible to visitors who come from all over the world, and who find it difficult to reach Henry Street.

TRAINING SCHOOL ENDOWMENTS

We commented recently on the endowment fund being raised by the graduates of the Johns Hopkins School. We have heard since that time of further efforts by other schools. The Massachusetts General of Boston, the Lakeside of Cleveland, and the Lankenau Hospital of Philadelphia are all working for endowments of their schools. A special memorial fund is being raised by the graduates of the Hartford Hospital, Hartford, Conn., in memory of Lauder Sutherland, its gracious superintendent.

A NEW PRESIDENT FOR THE PUBLIC HEALTH ORGANIZATION

We learn, from personal correspondence, that Edna L. Foley is giving up her position as president of the National Organization for Public Health Nursing, and that Elizabeth Fox, of Washington, D. C. will succeed her for the remainder of her term of office. It is because of too great strain upon her health that Miss Foley is obliged to give up her office. All who know her energy and efficiency will be sorry that the Association must lose her as an officer, but Miss Fox will carry on the work with the same ability, which she shows in the conduct of her other duties. Miss Fox is, as we all know, Director of the Department of Public Health Nursing of the Red Cross. She is nearer to central headquarters, and will be able, more easily than Miss Foley, to make the trips required by the organization work. Our regret at Miss Foley's resignation is accompanied by perfect confidence in her successor.

NURSING PROGRESS IN THE PHILIPPINES

We do not often hear of nursing affairs in the Philippines so we were especially interested in meeting, at the New England convention, Miss Nicolle who is, we believe, superintendent of nurses at the

civil hospital in Manila. Miss Nicollet told us that they have laws for the registration of nurses and state board examinations. The entrance requirement is, at present, one year of high school, but this will be increased by one year, annually, until the full high school course is required. All the student nurses in the civil hospitals are Filipinos.

PROGRESS OF STATE REGISTRATION

Vermont: The nurses of Vermont presented a new bill for registration last winter which was killed in committee. The chief feature of the bill was a larger examining board composed of equal representatives from the medical and the nursing professions. At present Vermont has, we believe, a board of three members,—two doctors and a nurse. It is evident that nursing laws cannot be satisfactorily administered by such a board, even if it were always composed of doctors whose sole aim is the good of the nursing profession and a nurse who truly represented the ideals of her sisters in the state. No one nurse can combine in herself so many qualities, and no doctors, however disinterested, can have the point of view of the nursing profession. Doctors would not wish the ablest lawyers to conduct their affairs for them, and it is not obstinacy, but a reasonable desire to manage their own affairs, which has caused nurses throughout the country to endeavor to get examining boards composed of nurses only. Where this is impossible, at least nurses should be in the majority.

Rhode Island has a new reciprocity clause, but we have not seen a copy and do not know its provisions.

Missouri: Our attention has been called to an error in the text of the Nurse Practice Act, recently passed in Missouri, as it was published in the *June Journal*. Copies of the Senate bill were submitted to us for publication and we are now informed that this suffered an amendment in the House and on page 665 of the *June Journal*, subdivision 4 of Section 9162, should read as follows:

Any person of good moral character who desires to engage in the care of the sick in communities other than cities of the first and second class, may engage in the care of the sick upon obtaining a certificate from, and signed by, a licensed and practicing physician stating that such person is competent and qualified to engage in caring for the sick.

Mrs. Greeley comments on this special ruling as follows:

This provision was made necessary by the peculiar conditions in rural Missouri, which is almost destitute not only of graduate nurses but of practical nurses as well, besides being remote from cities, hospitals, and railroads. Such nursing as the smaller communities have had has been done by the women in the calico sunbonnet. She is vanishing so fast as to offer no menace to nursing standards, despite the seeming laxity of this provision. The younger practical nurses everywhere seem to be preparing to apply for licenses as attendants before the expiration of the waiver.

ANNA CAROLINE MAXWELL, R.N., M.A.

"Our beloved Miss Maxwell" is the way in which she is most frequently spoken of, by her students, friends and many others who have had the privilege of coming in contact with her radiant personality. When the possibility of Miss Maxwell's retirement from the Directorship of the School of Nursing of the Presbyterian Hospital was first rumored last spring, it was met with incredulity and surprise. Miss Maxwell retire?—Why, we could not allow her to do so! But as the weeks have passed, Miss Maxwell herself has made us feel that she was anxious to lay down the burden of active work, which she has carried so joyously during the forty-five years of her nursing life. Slowly we have come to realize that the same zest and enthusiasm, which has made her such a distinctive figure, is seeking other channels which require a larger measure of freedom than is accorded the executive of a school of nursing, and is already finding expression in plans for travel and the enjoyment of such leisure as her life-work has not afforded. With this in mind, Miss Maxwell's numerous friends have found a certain measure of comfort in realizing that she will still be "one of us," but with a more generous margin of time for personal as well as professional interests. Accordingly, all the functions connected with her retirement have been pervaded with the spirit, not only of admiration for all she has accomplished in the past, but of happy anticipation of all the good things the future holds for her. For many years she has been such an outstanding figure, that we may well review her life and history, in order to profit as far as we may by the example of her genius.

Miss Maxwell was born in 1851, at Bristol, New York. Her father, John Eglinton Maxwell, came of a distinguished military family in Scotland where he was born. He was educated at the University of Edinburgh and was ordained as a clergyman. Her mother, Diantha Caroline Maxwell was born in America of English descent, her ancestors having come to America in 1634. Her education was carried on at home with tutors; later she spent two years at boarding school. In 1874, she accepted a position at the New England Hospital as assistant matron, where she received three months' obstetrical training.

In 1876, she entered the Training School of the Boston City Hospital, graduating in 1880. She was attracted to this school by the fame of Linda Richards, the first American nurse, under whom she received her training, so that Miss Maxwell's connection with the beginnings of our profession in this country is very close. One who

was for a few weeks a student in a ward where Miss Maxwell was head nurse, says she has always remembered her thoroughness and how inspiring her enthusiasm was. The conditions that obtained in training schools at this time, and for many years later, are cleverly portrayed in the article entitled, "Struggles of the Pioneers," published in the February number of the *American Journal of Nursing*, though as usual Miss Maxwell refrains from any mention of her active share in changing them.

A letter has come into our hands in the legible and old-fashioned handwriting of Dr. George H. M. Rowe, who for many years invested the position of Resident Physician and Superintendent of the Boston City Hospital, with a dignity that enhanced the standing of the institution itself. That Dr. Rowe was a man of discernment and prophetic vision is shown by the following quotations:

Miss Maxwell in my judgment possesses unusual qualifications for a nurse. She brought to her vocation an enthusiasm for her work, a good education, good physical health, an earnest desire to excel and quick observation. During her course she developed the ability to command and obey, great fertility of resources and the uses of economy, in time and material. She has shown a faculty of "getting-on-well" with other people, and a strong determination to overcome obstacles. By quick discernment and diligent application she has become well versed in the technicalities and practice of nursing. She understands likewise the theories and accomplishments. She is an excellent instructor and rendered our Superintendent of Nurses very great aid. I esteem her admirably fitted for the position of Superintendent of a Training School, and should feel confident of her success.

Immediately after graduation Miss Maxwell was called to establish a School of Nursing at the Montreal General Hospital in Montreal. After a fruitless effort of six months, trying to work with managers and doctors not ready to make proper concessions for a school, with poor living conditions, no arrangement for the education of the students, and with few applicants for entrance as probationers, Miss Maxwell left for Europe where she visited many of the hospitals in England.

Returning to this country in November, 1881, she took charge of the Boston Training School for Nurses connected with the Massachusetts General Hospital. In an old conservative hospital where everything had been perfect under the "old regime," progress was necessarily slow. Nevertheless, a residence for the nurses was built within the hospital grounds, a night superintendent was added to secure better care for the patients and to relieve the superintendent of some of the increasing details of her work, and lessons in massage and in cooking were secured for the nurses. A uniform for the students and a badge for the graduates was considered. The housekeeping

care of the hospital wards was given into the hands of the superintendent of the training school. An entire change in the attitude of the house staff towards the nurses developed and the spirit of prejudice of the early days gradually gave way, as the nurses proved themselves helpers and not competitors.

Indicative of those early days is a story told by one honored in our profession today. This young woman had finished high school, and in a dilettant fashion was considering entering a training school. Utterly ignorant of the standing or duties of a nurse, she was referred to the Massachusetts General Hospital to see Miss Maxwell, who settled all her doubts, and within five days of her first glimpse of a hospital, she found herself enrolled as a student. During her probation period her supreme hope seemed to be that she would not be accepted, but fortunately for her and the profession, she kept on through many weary days and nights of stern, absorbing duty and completed her course.

She found the physical and nervous strain excessive. The hours in the wards were from 6:45 a. m., until 8 p. m., with one hour's rest daily, a few extra hours weekly and only sufficient time to get enough to eat of very simple fare. "The menu returns accurately to mind after thirty-seven years!" But Miss Maxwell's influence was compelling; her pupils leaned on her strength and judgment with complete confidence and then later on they realized she was inculcating standards and ideals which were to stay by them. Her peculiar gift of precise, forceful capability was supplemented by a breadth and sincerity of heart and mind, and by her individual grace and beauty.

In the spring of 1889, a call came to Miss Maxwell to complete the organization of the Training School for Nurses at St. Luke's Hospital, where she remained until the fall of 1891. That her work at St. Luke's Hospital was successful is attested by the following abstract from the minutes of the Executive Committee, of the Board of Managers, dated November 30, 1891:

RESOLVED: That the resignation of Miss Anna C. Maxwell as Superintendent of Nursing at St. Luke's Hospital be accepted; but that in doing so, the Committee express and enter upon their minutes their sincere regret at the termination of Miss Maxwell's connection with the hospital, and their high appreciation of the experience, skill and ability which she has shown in the discharge of her important duties; that the Committee recognize with pleasure that the success of the training school of this hospital in these first years of its existence and its establishment upon a permanent basis are in large measure due to Miss Maxwell's intelligent and earnest work as Superintendent of Nursing.

On leaving St. Luke's Hospital, Miss Maxwell was offered the appointment to establish the School of Nursing at the Presbyterian

Hospital, New York City. She entered upon the duties of this office on January 1st, 1891, the first class graduating in 1894. Through the exceptional support received from men like John Stewart Kennedy, President of the Hospital, Frederick Sturges, Chairman, School of Nursing Committee, and Dr. C. Irving Fisher, Superintendent of the Hospital, was made possible the establishment of a school upon broad lines. The coöperation of the medical staff, although at times difficult to secure, has, on the whole, always been remarkable, and the managers have through many vicissitudes maintained standards of education which seem necessary in order to give the student nurse adequate preparation for her future work.

During the Spanish American War, in the summer of 1898, an epidemic of typhoid broke out at Camp Thomas at Chickamauga Park, Georgia, where 50,000 men were being trained. The third auxiliary of the American Red Cross had secured funds to send out a corps of nurses to care for the soldiers, and Miss Maxwell secured leave of absence from the School of Nursing to take charge of the nurses at the Sternberg Hospital, just being opened at Camp Thomas. One hundred and sixty nurses were sent to the Camp, and over six hundred typhoid cases were cared for besides malaria and an epidemic of measles.

Miss Maxwell and her nurses arrived July 29th and the first patients were received early in August. Owing to chaotic conditions, only tents and beds were in readiness for these first 136 patients. Necessary supplies and equipment were still unpacked from the train. As supplies and equipment were augmented, more patients arrived. Many who had once been strong, splendid men were now emaciated and delirious. Sordes in which dead flies were encrusted filled their mouths and many had bed sores several inches deep. Only sixty-seven deaths, out of a thousand cases admitted, occurred. The highest praise given for the work of the nursing corps was the remark made by Colonel John Van Rensselaer Hoff—"When you were coming, we did not know what we were to do with you; now we wonder what we could have done without you. The organization of your department is the best in Sternberg Hospital."

Following the Spanish American War, a committee was formed in New York, of which Miss Maxwell was a member, to secure an act of Congress to establish a corps of nurses to be prepared to care for our soldiers in case of war. Numberless delegations were sent to Washington to work for the bill which was finally defeated. Through the continued efforts of the committee, the War Department was incited to bring forward a bill of its own, and the Army Nurse

Corps was created as a part of the military establishment of the United States Army.

When the Great World War broke out, our American Red Cross brought forward as a measure of preparedness, the formation of "units" in connection with the leading hospitals of our country, and securing the nursing personnel for the unit for the Presbyterian Hospital fell to Miss Maxwell. She accepted the position of Chief Nurse. When we declared war on Germany and the call finally came, it was thought wiser for Miss Maxwell to remain here, but in 1916, she went abroad in company with Miss Givenwilson to visit the hospitals in the war zone. Through introductions of the Red Cross and other officials in this country, they visited the three fronts, bringing back reports of the work and a better understanding of nurses' work under a military organization.

At a meeting of the American Nurses' Association in Philadelphia, the question of uniform for military service was discussed. Knowing the importance of sending our nurses overseas properly equipped, Miss Noyes asked Miss Maxwell to form a committee of the chief nurses in New York to choose a uniform for this purpose. The British had asked for six of our units consisting of medical, nursing and orderly personnel to replace their hospital staffs, and these six units preceded our army to France. One unit had already sailed and two had to be equipped before leaving within a week. The committee was successful in securing the services of a reliable firm which produced three hundred uniforms in one week.

There was much work to be done in consulting, helping to organize and to aid in the work of the Red Cross and other organizations during the succeeding years. In the summer of 1918, Miss Maxwell visited the Presbyterian Unit at Etretat, France, and was greatly impressed with the successful work accomplished for the wounded, and with the morale of the entire personnel.

During these years the Presbyterian School of Nursing had forged steadily ahead and due to the inspiration and high ideals of its leaders, it has always been one of the first to introduce such changes as make the training truly educational. One result of the generous and far-sighted policy pursued has been to attract the very best type of students, until today the school has as much reason to be proud of its graduates as they in turn have reason to be proud of their Alma Mater.

One of Miss Maxwell's strong points has been her genius for perfection of detail, and her very sympathetic attitude towards the patients, which has been an endless benediction to all who have come under the care of her students. Demonstrations of nursing methods

before the public were first shown at the Presbyterian Hospital, and her graduates have carried her system of nursing technique to all parts of the civilized world, so that it would be difficult to estimate the extent of her influence. This has been reinforced by her textbook on Practical Nursing written in conjunction with Amy E. Pope, one of her students and later her assistant for many years. Happily such conspicuous work did not pass unnoticed. In 1917, the Governors of Columbia University conferred on Miss Maxwell the Honorary Degree of Master of Arts, making her one of the first women in all history to receive such an honor for furthering the education of nurses. One whose good fortune it was to receive a degree at the same time can recall distinctly the unique joy evoked by Nicholas Murray Butler, President of Columbia University, when he spoke the following words:

Anna Caroline Maxwell, Director of the School of Nursing at the Presbyterian Hospital in the City of New York for a quarter century; for more than thirty-five years giving talent, knowledge and high devotion to the training of nurses for their important place in modern life; always holding the highest professional ideals and earnestly inculcating them in others, I gladly admit you to the degree of Master of Arts in this University.

In 1918, Miss Maxwell became a member of the committee for securing military rank for the Army Nurse Corps. The committee worked arduously for two years, and Rank for Nurses became a law by Act of Congress in June 1920.

Learning of the successful campaign for raising standards and recruiting students that was being carried on by the Western Council of Nursing Education in Chicago, Miss Maxwell brought about the formation of a committee to establish an Eastern Council of Nursing Education in New York. This Council was ratified April 18, 1921. The plan incorporates two Managers, the Superintendent of the Hospital and the Superintendent of the School of Nursing of each hospital joining as part of the organization. This brings together for mutual conference the important members of the hospital staffs.

Despite the many claims on her time and the numerous activities incidental to her work, Miss Maxwell has always found time for social life, and is a member of the Cosmopolitan Club, the Women's City Club of New York, and the National Institute of Social Science, as well as multitudinous nursing organizations. Perhaps even more important and significant is the fact that she has always found time to be human and helpful to any nurse seeking professional advice, or just friendly assistance and encouragement. Small wonder then that the news of her resignation was electrifying, and at once her numerous friends started to make plans to honor her publicly. By special

request of Miss Maxwell these plans have been postponed, and it has been left to the Board of Managers of the Presbyterian Hospital, her school, and alumnae, to honor her. This they have done in superb fashion. Immediately word was sent to all the graduates, and out of a total 736, about 400 responded by being present and in uniform, at the commencement exercises which were held the nineteenth of May, in the Madison Avenue Presbyterian Church, of New York. The picture of the long processional of superintendents, head nurses, and graduates, in the order of the classes from 1894 to 1920, followed by the thirty graduates of 1921, filing into the pews and filling the greater portion of the body of the church, was one not soon to be forgotten, and was a wonderful tribute to the personality that had caused so many to gather to witness her last and most significant function as the Director of their school. There was an air of tenseness and expectancy during the presentation of the diplomas to the graduates, each of whom was applauded most generously. When the last one had been presented, William Sloane, President of the Board of Managers, stated that it was his privilege to present still another diploma which had not been listed, and asking Miss Maxwell to come forward, he proceeded to read from an engraved diploma this generous expression of appreciation:

The Presbyterian Hospital regards Miss Anna Caroline Maxwell as the founder, in 1892, of its Training School for Nurses and its guiding spirit for twenty-nine years. Her influence has been felt not only in our own institution, but in hospitals and training schools, and in the nursing profession generally throughout the world.

Miss Maxwell was graduated from the Boston City Hospital in 1880, and served in the Montreal General Hospital 1880-1881; Massachusetts General Hospital, Boston, 1881-1889; St. Luke's Hospital, New York City, from 1889-1892; Presbyterian Hospital, New York City, 1892-1921.

Gifted with a wonderful magnetic personality and endowed with a clear insight into the possibilities in the development of the nursing profession, sympathetic with the successive new steps made necessary in the methods of teaching, jealous of the position of the nurse in civilian life and ambitious for her proper recognition in military service, an inspired teacher, a helpful friend and a superb type of womanhood, Miss Maxwell has been the glory of this institution, and more than anyone else, has added lustre to its reputation for nearly a third of a century.

The Board of Managers, in recording this tribute to Miss Maxwell, upon the occasion of her resignation, wishes her abundant health, to enable her to carry forward the good of the noble profession which she has so long adorned.

The applause that greeted this was continued so long that one could not help feeling that after all, the greatest opportunity life offers is self-sacrifice and the pursuit of high ideals.

For many years it has been the custom for the Presbyterian graduates to celebrate the day following Commencement as Alumnae

Day, and the plans for this special occasion included a luncheon followed by a ceremony in honor of Miss Maxwell, expressing the "affection and loyalty of her children." After luncheon Elizabeth Brackett, the president of the Alumnae Association escorted Miss Maxwell to the centre of the Assembly Hall. Encircled by hundreds of her nurses, she stood in front of a gorgeous mass of American Beauty Roses, the gift of the medical staff. Among those nearest Miss Maxwell was a representative from each class, who had been chosen to speak for her class on this occasion. Miss Brackett then read the following resolutions with dignity and clearness.

To ANNA CAROLINE MAXWELL, The Voice of Her Nurses:

Because of the approaching retirement of Anna Caroline Maxwell, the founder, and the director for a period of thirty years, of the Presbyterian Hospital School of Nursing in the City of New York, we, its graduates, desire to place on record, this testimonial to her whose personality has so preëminently given distinction to the Presbyterian Hospital School of Nursing. Although we shall be inexpressibly saddened by the severance of Miss Maxwell's active connection with the school of her making, we may rejoice that we have known her as our Chief and we can glory in her achievements and in her personality and ability which have contributed so richly to the constructive and educational development, not only of this particular school, but of the entire profession. As our truest and most heartfelt tribute we offer unalterable allegiance to her as our guide in upholding nursing standards. We extend to her our most affectionate congratulations, and pray that she may live long in the enjoyment of the fruits of her work and to be our continued inspiration.

These resolutions beautifully engraved and bound in vellum with a school pin embedded in the cover were handed to Miss Maxwell. Before she could respond, the class of '94 made itself heard, and in swift succession each class attempted to express, in the one brief moment allotted, a tribute to Miss Maxwell. In each case this was unique and characteristic, not only of the individual, but of the class.

Touching on widely varying points of their relation with her, some recounted episodes marked with deep sentiment, others with rare imitation recalled amusing situations and vivid repartee, illustrating Miss Maxwell's deft handling of surprising situations and still more surprised students. Twenty-seven classes thus passed in review, concluding with the infant class of 1921. Laughter, tears and cheers, all in a moment!

Mary Magoun Brown was entrusted with putting into words the final expression of love and reverence when she offered Miss Maxwell a bouquet of roses, which concealed an envelope, containing a check for \$4,000 and a line indicating the hope that this might be used for "a little spree." The musicians had been instructed to play at this juncture, "For she's a jolly good fellow," the intention having been

Counting nothing, so she helped one on and upward to the summit of their life-work.

First and last and always, Mother, through her tender ministrations to the young
and sick and helpless,
That's the woman as I see her not a dew-drop, not a plaything,
For your poets or your princes, but a splendid great creation,
From the Master-BUILDER's workshop for the healing of the nation.

THE ELEMENT OF PERSONALITY IN NURSING

I. THE ROLE OF TEMPERAMENT

BY DONALD A. LAIRD

*State University of Iowa
Iowa City, Iowa*

A factor which looms large in the daily experience of nursing and one regarding which the nurse has unfortunately received but meagre, if any, instruction in training is the temperamental equation of the patient. Each case which comes under the care of the nurse is an individual case in the fullest meaning of the term individual. It is more than a matter of individual diseases and pharmaceutical individuality. The patient is as much an individual personality as an individual person. The most marked and obvious variations between individuals as they concern the activities of the nurse are not organic and physiological variations but differences in that intangible group of mental characteristics which give rise to what is called human quality or personality. It is this factor of personality which makes attendance upon one patient a tiresome drudgery while attendance upon another case, similar in all respects save the matter of human element, is a refreshing joy.

I know of no training school which includes human personality in the curriculum unless it might be in the prolegomena where nursing ethics are under discussion and "always cheerful, always consistent, always considerate" are found to be some of the complex traits that aid the nurse to approximate the dignity and reserve of personality which her profession requires. I am of the opinion, however, that those with an extended nursing experience will support my contention, that in innumerable cases, which are by no means a rarity, it is the personality of the patient rather than the personality of the nurse that causes a maladaptation of the sickroom situation. The grumbling, discontented, faultfinding, reserved, worried, fretful, mischievous, happy, grateful patients are what make nursing a boredom or a delight, as the case may be; and these traits are fundamentally a matter of the personality characteristics of the patient. A careful study

of some of the more important elements of the patients' personalities evidently would go far toward facilitating an adjustment and reducing the strain on both the patients and the nurse, making nursing a trifle more endurable at times if not at all times and, as will be shown with some little detail later in the paper, the personality traits which we will consider are really influential in assisting or hindering a recovery.

There are a few persons who seem to be especially gifted in understanding the human quality in others. We see evidence of this on the wards of the state hospitals for mental diseases in the case of a select group of relatively untrained but sympathetic workers who have established a *rapprochement* with a large number of mental patients in whom the personality characteristics are most exaggerated and usually one-sided. The successful business executive, the man who is fortunate in his management of healthy people, also seems to have an intuitive knowledge of human personality and its relations. Likewise many nurses by a gracious Providence are capable of adjusting themselves to almost impossible situations and of adjusting situations to themselves. As a rule the nurse with a long period of service has accumulated a set of working hypotheses from actual contact with a variety of personality reactions and can manage the adjustments of a rather difficult situation better than can her less experienced co-worker.

All of us are not endowed with this sympathetic power of understanding human qualities and one cannot acquire a large enough experience to form adequate working hypotheses without feeling many rebuffs and being party to many bunglesome adjustments. However, it is not all a matter of experience and special insight. A familiarity with the facts and functions of some of the more important components of the personality will greatly shorten the time required to provide better adjustments to difficult situations and raise the general level of personality relations with the reciprocal beneficial results upon the nurse and the nursed.

To establish an adequate basis for the understanding of the personality from the needs of the nurse, it is necessary to go rather minutely into a consideration of some of the prime components of this human quality. The central mental material which is the main determinant of the personality is found in the affective life which radiates into all activities of the human organism and on occasion dominates the whole behavior. Some idea of the vast sway of this affective life can be gleaned from the statement that it is always present and not rarely is the ruling element, dominating both the overt behavior (visible action, such as striking at an enemy in defense, fleeing from danger or blushing) and implicit behavior (reactions

ordinarily unperceived such as glandular response, changes in cell permeability, increase of the Nissl substance in nerve cells, etc.) of the organism.

All mental states, all moments of consciousness, are accompanied by *affects* or what may be termed *feeling-tone*. As you read these lines the perception of the words and meanings is accompanied by a feeling of pleasantness or unpleasantness, of mild pleasure or of mild displeasure. This feeling of agreeableness or disagreeableness may be caused by cramped diction in these lines, by a disapproval of the subject about which you are reading, by a persistence of some memory of a grumbling patient which the second paragraph of the article brought to consciousness, or by the fact that all evening you have been elated over the perfect beauty and becomingness of a new bonnet you purchased this afternoon. Whatever the cause of this feeling of pleasantness or unpleasantness which you are just now experiencing in a mild, or marked form, it is present and you can discover it by self-inspection of your mental content.' This vague feeling (from which the term feeling-tone originated) may perhaps be more readily discovered if you recall a pleasing scene which you have witnessed and contrast the feeling of pleasantness with the unpleasantness caused by memories of an accident or a severe reprimand.'

This affective quality of pleasantness or unpleasantness is always present in our mental life but varies in amount and kind from time to time. We are not always exuberantly joyful or miserably melancholy. A generally optimistic person, however, is usually an optimist against all odds, and the optimistic strain permeates his entire behavior, although the death of a loved one may alter his affective feeling-tone temporarily.

These affective qualities which accompany all mental states are known as *simple feelings* when they are of a fairly simple nature and arise directly from some immediate stimulation; for example, the unpleasantness many persons experience in hearing the squeak of a caster or in smelling the odor of asafoetida. When the affective reaction is more complex and the stimulus or cause is less definite and less simple, the result is known as an *emotion*. Examples of emotions are fear in an accident, grief over the demise of a friend, and joy at

This is called introspection by psychologists.

I find personally that motion pictures offer an excellent opportunity for the observation of affective states, although such observation does take the edge off the dramatization. If a person can catch himself in a state of excitement or pleasure, mirth, fear, tender emotion, grief, etc., while witnessing a motion picture, an almost unparalleled opportunity is had for observing the general feeling of expansion that goes with pleasure, the dry palate in fear, the quivering laryngeal musculature in tender emotions, etc.

again meeting a relative from whom one has long been separated. When the affective state is extremely intense and of relatively short duration, we have a *passion* such as anger, terror, and rage. In the other direction, an affective state which amounts to a mild emotion and is continued for some time is termed a *mood*. We have as illustrations of moods a "spell of the blues" and its opposite state of general mental well-being. Moods of moderate intensity may become continuous and really become permanently dominant in one's mental life. Thus we have the various *temperaments* such as the continually anxious, the eternally suspicious, the quarrelsome, and the optimist. It is in the sphere of temperaments that this brief psychological introduction to the question of personality, as it comes into contact with practical nursing problems, will bear the greatest results. Temperaments are thus seen to be really affective states of weak intensity and long continuance almost to the point of permanency.

As long ago as four centuries B. C., Hippocrates, the ancient physician, propounded his fourfold classification of the temperaments which is classic to this day. His divisions are the sanguine, the choleric, the melancholic, and the phlegmatic. Galen the physiologist, who was in reality a philosopher, described four humors in the body; namely, phlegm, black bile, yellow bile, and blood, and to these he ascribed the production of the different temperaments. According to Galen, for example, individuals in whom the phlegm was dominant would be phlegmatic, and so on with the other humors. The bodily humors do have a very important function in temperament, as we shall later find, but it is not nearly so simple a matter as Galen would have it.

At this point nothing could profit us more than to take up the temperamental symptoms, so to speak, of these four classes of temperaments. This will make it possible to classify ourselves and our patients, and when we turn to the practical indications we shall have some fairly concrete instances firmly fixed in mind.

The *sanguine* type are the optimists, enjoying life as they find it and taking a great joy in living. They are happy and hopeful, bubbling over with enthusiasms, but conservative in their enthusiasms. Their personalities are usually pleasantly infectious and socially they are the life of the party. On the score of action they can be described as rather slow to action but strong when once in action. In contrast with these sanguine people who make the best of things as they are, we find the *choleric* who are usually dissatisfied with the present order of things and who go ahead to change and improve creation. The choleric are much quicker to respond than the sanguine and respond much more vigorously. They are fitful and uncertain, self-conceited,

quarrelsome, overbearing, jealous, inordinately haughty, and strong in retaliation. Friendship with a choleric is always uncertain for it may end in a fit of passion; he is always right and others are always wrong.

The *melancholic* is not exactly what might be implied by the name. Primarily they show a tendency to delay the response to a situation until it has been carefully pondered over and even then they are usually somewhat hesitant in action. They are not interested in the superficial but possess a basal seriousness and consequently have a great capacity for heartfelt sympathy and deep affection and are religious with a tendency toward mysticism in their religion. They have a range of emotional variability and will laugh and jest on occasion but in general are a worried type, lingering on the darker side of things, moody, and anticipating troubles that never happen.

The *phlegmatic*, like the melancholic are slow to action but with these, even after the action has been carefully pondered over, it is usually avoided by inaction. They are the easy going type of personality, repose rather than action is their chief characteristic. They joke with difficulty and have a tendency to criticise others scurrilously. Ordinarily they are not easily started in action but when once under way, display no little persistence. They have an inability to be depressed or overjoyed, they are not quarrelsome and are not effusive. Where the choleric will slap you on the back and shake hands vigorously, the phlegmatic will recognize you, perhaps say "Good morning," and possibly shake hands or lift his hat in recognition.

Patients with the choleric temperament are the prime grumblers and fault-finders, and they take the lead in seeking trouble and dissatisfaction. Ordinarily accustomed to use a large amount of superficial energy as an outlet for their mental energization, this activity must necessarily be curtailed in the sick-room, and unless this temperamental motivation is given a motor outlet, as it is in the "fidgety," restless patient, the nurse is very likely to be made the object of wordy abuse and criticism. The phlegmatic patients are quiet and monotonous, almost to dullness, reluctant about spontaneously conveying information regarding their bodily condition, and requiring much more attention to their state of health than does the choleric who will make known his least discomfort and request the pillow changed and the sheet smoothed, dozens of times daily. The melancholic are overly eager to obtain sympathy and are usually worried about their condition of health; they fear the nurse will perhaps fatally neglect them, at some moment, and in almost the same thought will entertain the fear that the nurse is over-working and will perhaps contract some disease from them. The sanguine patient is

probably the best all-around patient,—jovial, frank, loath to complain or cause any unpleasantness, adaptable to a variety of situations, and capable of appreciating the trials of nursing. It is these sanguine patients who, when on a ward, are the first to indicate to the nurse that they understand the fact that some of the other patients are a millstone; by their well-liked personality they add a measure of cheer to many a difficult ward group of personalities.

Among our friends and acquaintances it is possible to select certain ones who are unmistakably of the choleric type, others of the phlegmatic, and so on. It is also possible for one, if he is very frank with himself, to introspect and find his proper niche in the above classifications, and it is of no little value to make such an analysis of one's self and try to find just what are the strong and the weak points of our personal temperaments, for they all have their strong and their weak points. For some it may be a difficult task, however, for aside from the question of absolute frankness, there are many types that are called *mixed types*. That is, ordinarily sanguine personalities have a slight admixture of the melancholic or the choleric, which make it extremely difficult to really determine which is the predominant trait. We have an example, not of the mixture of temperaments but their alternation, in the *clyco-thymic* personalities where the choleric and melancholic alternate. When these two particular temperaments become very marked and their alternation definite, so that they are no longer normal, we have a maniac-depressive mental disorder with which every nurse is familiar.

(To be continued)

THE WORK OF THE PRIVATE DUTY NURSE, TODAY

BY MINNIE S. HOLLINGSWORTH, R.N.

Boston, Mass.

You, who are members of this Division and of the American Nurses' Association, know, or should be familiar with, the requirements of these organizations. Several years of education and training are required before a nurse is considered eligible for membership. Therefore, every superintendent looks for a girl of good breeding and refinement, and one who is teachable. When an applicant enters the training school, the superintendent places her where she thinks she can best adapt herself, noting her attention to work, her neatness, deportment, observance of rules, obedience to the doctors and head nurses and the improvement made along these lines.

¹Read at a meeting of the New England Nurses' Association, Concord, N. H., May 11, 1921.

The question has often been asked: "What is ethics?" One answer that has been given is: "Your human duty towards all." Another is: "Common sense." Ethics deals more with the spirit of nursing than it does with the technique.

There is no profession which receives so much criticism as does ours, particularly the branch of private duty nursing. I do not know of any one, whether engaged in nursing, or some other line of work, who will not at some time be criticized. Superintendents as well as the pupils and the graduates come in for their share. If a nurse does not please you, why be so unkind as to think she can not succeed elsewhere? There is good and bad in all of us, and if such criticism could only be constructive instead of destructive, it would be far better for all concerned. A little praise and a kind word will do more to make the day's work easier for the pupil, and even for the graduates, than many a special lecture or social function.

I have sometimes felt that the public, as well as the graduates would be spared a whole lot if the inefficient and non-trustworthy were not allowed to graduate, for often when a nurse has not shown any special aptitude for office or executive work, and does not care to become an industrial or public health worker, she is advised to take up private duty nursing. This would seem to indicate to those of us who know what the qualifications of a good private duty nurse should be that any one could do private nursing. I do think that if a nurse has any love for the work, or a desire to be useful and helpful, she can find herself quicker in private duty nursing than in any other branch of the work. I also feel that every superintendent could give her pupils a better training in the art of caring for the sick, if she herself would do at least one year of private duty nursing, and if she would spend that time not in "specialling" in an up-to-date hospital, where all the cares and responsibilities are assumed by the physician and the head nurse and where she is relieved of the burden of the household work and that trying ordeal of managing the family, relatives, and friends of her patient, nor that she spend that time nursing in the homes of the wealthy but that she nurse among those of our own class, for it is by actually doing the work that one is able to learn many a lesson not taught in the training schools. At the same time a good representative from a hospital is often able to carry into many homes its teachings, and the nurse's experiences may perhaps help a family in solving some of its weighty problems. Superintendents have told me that their best and most valuable experiences were obtained in doing private duty nursing, and I sometimes wonder what they would do if they had not had these experiences to draw from.

To me there seems to be no branch of nursing that gives to the nurse that rare opportunity of keeping abreast of the times and learning something of public affairs as does private duty nursing. She meets the different classes of people in their homes and in regular life, where they are natural, and if she is wide awake and interested enough in other things besides her case, (and this does not mean neglecting her work), the daily contact, environment, and association with those around her will help to broaden her ideas and views of life, no matter what her past opportunities may have been. To meet the physicians outside one's own hospital staff and city, to get their ideas and viewpoints of things, and to learn their ways and methods of caring for the sick, are of great benefit to the nurse.

Loyalty is a splendid thing and every nurse should possess a certain amount, but she should not be so narrow as to feel that her hospital and its ways and teachings are the only ones; many valuable lessons have been learned far from one's hospital and the city doctors.

Much has been said recently about the shortage of nurses, both in the hospitals and in other fields of nursing, but many private duty nurses have said that there was little work for them. So far as I have been able to learn there is a greater demand for nurses today, but certainly there have been many more graduated than there were ten years ago, or even five years ago. I would like to quote from figures given to me by the registrar of the Boston Central Directory for Nurses. During the past year with a list of 705 members, there have been 8,366 calls for nurses; 4,848 were from hospitals for "specials", a number being for private patients; and 3,518 were from private families. These figures show that one-half of the number were calls to hospitals and almost one-third to private homes. A number of people who used to have nurses in their homes are going to the hospitals today, partly because of their domestic problems, and also because they can obtain full care in the hospital for what it would cost them in their own home for a graduate nurse for the same length of time.

Among some nurses today the chief questions are those of salary and hours of duty. In one of the western hospitals a plan has been tried whereby one nurse may "special" two or more patients, who are not ill enough to require the full attention of a nurse, and the nurse is paid more than she would be paid if she were caring for only one patient. The patient is charged less than she would be if she were having a "special" to herself. This plan has been found to be very satisfactory to both patient and nurse.

There are few people who could afford three nurses in twenty-four hours; and to the average patient two nurses are a luxury, while

one nurse, at the prevailing prices of \$35.00 to \$45.00 is oftentimes a hardship.

I am familiar with the expenses of the nurses and the patients and I feel that when a nurse makes a charge of \$45.00 per week, or more, that she should be willing to give the best that is in her. I regret to say that I have been told by some nurses that they are doing private work for what they can get out of it in dollars and cents, feeling that their years of training were hard enough to justify them in charging whatever they could get in order to compensate them for the sacrifices they made and the service they had rendered the hospital while in training. I know only too well the sacrifices that nurses have made and are making, but why make the question of salary a hardship to the families when there is a life at stake? Every graduate should bear in mind that we are a body of professional women and that our standards should not be lowered by forming a union to establish shorter hours by legislation.

Some of the older nurses know what a struggle we have had in trying to educate the public to fully understand and appreciate the graduate nurse and our work is not yet completed, although we have made considerable progress along this line. We still have the medical profession to educate. When we can be assured that the doctors are willing to coöperate with us in our work, as I believe the best nurses are coöperating with them, then our problems will be solved.

In one of our county meetings recently the subject for discussion was—"Has the private duty nurse lost prestige?" This subject amused me somewhat, because I feel that the private duty nurse, as well as all other nurses, has never had any prestige, except what she has made for herself. The word prestige means—"Influence derived from character or reputation." We know that the private duty nurse has made a place for herself, and that if she lives up to the standards set for her by such splendid women as Florence Nightingale, Linda Richards, Jane A. Delano, Isabel Hampton Robb, Sophia F. Palmer, and many others, who have been leaders in the nursing profession, she will have nothing to fear regarding prestige or her future.

During the war there were a number of generous hearted women who volunteered their services and helped in the camps, canteens, and various Red Cross activities in caring for the sick and wounded soldiers and sailors, and without their assistance the graduate nurses would not have been able to have done the special work to which they were assigned; and we owe them a debt of gratitude. However, there is a question that I should like to ask: Where are those college and society girls who were so filled with patriotism and enamored with

the desire to become graduate nurses? We need them now to help supply the demand for nurses. They were told they would be needed when the boys came home. It cannot be that they are all married!

While there is a pressing call and an urgent need for nurses today in the various kinds of hospital work, public health, child welfare, industrial nursing and all kinds of Red Cross work, we know that there has always been and always will be a demand for the kind-hearted, well-trained, sympathetic, tactful, private duty nurse, and it seems to me that the work for the private duty nurse is, just what it has always been, to take with her when she enters a home, that air of cheerfulness, willingness, and comfort to those who are ill in body and mind, remembering that no kind of work should be beneath the dignity of a graduate nurse, her duty being to serve those who need her. She should be natural, remembering that illness makes one abnormal and that she must be patient with the invalid, relieving her of all care and anxiety and that she must be thoughtful for others in the family.

In our desire for an easy job with a big salary, I think we are all getting too far away from the chief idea of being what we all want to be, true and useful christian women, comforting and serving our fellow men. We should not forget that we, like our Master, are here for only a short while and that it is our duty to help those around us, and, by so doing, we may leave behind us a record of which we can justly feel proud and by which others may profit as well as follow.

ODDS AND ENDS OF USEFUL INFORMATION

BY O. W. NOLEN

Louis, Texas

Did you ever have the irritating experience of sitting down in a seat on which some child had placed a wad of chewing gum? It made you wish the government would impose a war-tax of a dollar on each package of chewing gum, didn't it? The worst part of the incident was that you didn't know what to use to remove the gum from your clothes, and you probably tried to scrape it off with a knife, but just got things gummed up worse than ever; or you may have tried to work it out with soap and water and found that you made very poor headway in removing it. Next time you have occasion to remove chewing gum from a garment, wet a cloth with chloroform and use on it. The gum will immediately crumble up and brush off. When a child gets some gum in his hair, use a little olive oil to remove it.

While we are discussing sticky subjects, we might as well take up the problem of removing adhesive plaster,—the ordinary zinc oxide adhesive that is used in the hospital every day. When the plaster is removed, the coating that adheres to the skin can be removed with benzine. There may be other substances that will remove it, but benzine or gasoline can always be readily obtained.

Another useful thing to keep in mind is a convenient way to sterilize hypodermic needles in an emergency when ordinary means are not at hand. Just take a formin tablet—also known as urotropine—and ignite it with a match, it will furnish a good flame over which the needle or a spoonful of some substance can be readily heated.

If you have been liquifying carbolic acid crystals by the usual method of heating the bottles in a water bath, try filling up the original bottle with water (pound bottles of the acid have room left for about an ounce of water) then cork the bottle tightly, turn it upside down, and leave in that position. It usually liquifies in about twenty-four hours or so, and by preparing several bottles at a time in this way, the useless expense and trouble of heating them is eliminated.

If a blackboard in the hospital becomes greasy so that the crayon marks will not show readily, mix up some potassium carbonate and soft water and stir in about as much unslaked lime as it will take up. Dilute some of the solution with water and scour the board, then wash it off quickly as possible or it will destroy the color of the board. Remember that the solution is corrosive, and that it must be used with care.

To remove grease spots from paper or the leaves of a book, cover the spot with a piece of blotting paper and use a hot iron.

When a glass stopper cannot be removed from a bottle, try dipping a piece of cloth in hot water and wind it around the neck of the bottle. The expansion of the bottle by heat usually enables the stopper to be removed.

If you have occasion to try to fit a bottle with a cork that is too large, cut a wedge shaped piece out of the bottom of the cork, which will enable it to fit the bottle easily.

Sometimes medicine will discolor the bottle label in spite of all your precautions. When you receive a fresh bottle of medicine, paint the label with flexible collodion. After it dries, medicine can be washed off the bottle without injuring the label.

THE PROBLEM OF THE HOUR¹

BY CHARLES PARKER BANCROFT, M.D.,

Concord, N. H.

The advocates of the first hospital training schools for nurses had in mind merely the teaching of the fundamentals of good bedside nursing, in order that they might secure more intelligent and efficient care for their patients in the hospitals. From this simple beginning, nursing has broadened out, until it has formed contacts with almost every phase of community life, social and economic. In this evolution of your chosen profession, I have been for over forty years an interested spectator, and, as a practical hospital man, a partial participant. Modern nursing in this country began in the late 70's, at about the same time that modern medicine began its great advance. It seems at first sight passing strange that such an impressive object lesson did not more speedily meet with popular response, and yet, on reflection, the real reason for delayed recognition of the larger opportunities awaiting the nursing profession is not far to seek. Social science, at that time, had made little progress, and was awaiting the remarkable stimulus to be given by the higher educational institutions, especially by the university extension courses.

During all these past forty years, several important events have been transpiring in the social, medical, and educational world, that have had a distinct influence in directing the course of the nursing profession into new fields of endeavor. The bacterial origin of disease, and the bacterial infection of wounds, with its remarkable influence on surgery and preventive medicine, was one of the most outstanding discoveries of the nineteenth century, and its influence on the future of the nursing profession has been far-reaching.

With the advent of bacteriology, public health and preventive medicine assumed at once a new and larger meaning. At the same time, sociology was making rapid strides. Social conditions were being studied more closely and their influence on the causation of disease was beginning to be understood.

Our experience on the Isthmus and in Cuba demonstrated the actual bacterial causation of yellow fever and malaria. We then knew, a fact which we had long surmised, that the so-called germ theory of disease was no longer a theory but a scientifically demonstrated fact. We clearly perceived that all these great scientific achievements were closely co-related. The bacterial causation of disease prepared the way for a revised public health service, for a more intelligent system of preventive medicine, and more intensive social work in the community.

¹ Portions of an address given to the New England Nurses' Association, May 10, 1921.

At about this same time, interest began to be taken in the health of operatives in the various industries. Out of this movement has grown the rather large special field of Industrial Medicine. Conservation of health among school children is another large allied field of constantly increasing usefulness. The school nurse is fast becoming a very important factor in the community. Soon, no state nor county can afford to be without its school nurse and its district nurse.

Child welfare, public health, industrial nursing, school nursing, with their varied social contacts, demand young women who have had either a high school or a college education, or their equivalent, and who are graduates of a Class A. hospital training school. The acceptable filling of these positions calls for young women of good judgment and discretion, capable of meeting emergencies as they arise; consequently, they need the mental discipline that a higher education alone can furnish.

The great war was not an unmixed evil. Out of its terrible experience, much good has followed. We learned the importance of conservation of human resources, mental as well as physical. Infant welfare and child welfare assumed immense importance when we considered that we must replace the enormous human wastage caused by the war. Mental hygiene, when viewed in terms of conservation of the mind of the nation, lent new interest to the somewhat neglected field of psychiatric medicine and mental hygiene. Malnutrition in school children was taken up with new zest. All these activities are closely identified with the nursing profession, indeed, they cannot be realized without your assistance.

Unfortunately, in this period of readjustment, following the war, and through which we are now passing, there is a woeful lack of nurses. So many avenues of employment offering large remuneration were made available by the war that many young women were diverted from the occupation of nursing, but, in the readjustments that will be sure to follow, there will be those who will eventually seek again the many fine opportunities that an enlarged nursing service offers.

In meeting the issue incident to the larger demands made upon the nursing profession, I am satisfied that we must revise our educational qualifications for candidates and our methods of training, to meet the new demands that have arisen.

Registration should be standardized throughout the country. Reciprocity between states would then be justified because of identical educational standards in all the states. The safety of the public requires that every nurse should be either a registered nurse or a trained attendant, and that all other persons advertising as nurses

should be licensed. The graduate nurse must have had a full high school or college education or its equivalent; for a trained attendant, a grammar school education should be sufficient. The words of Jane E. Hitchcock are pertinent:

At present, we have to reckon with the truth that we have adults with a mental training of girls of sixteen, submitting themselves to examination in subjects that are adapted to adult minds.

The problem of the hour is: How will the hospital training school of the future adjust itself to the demands of the times? The public requires certain qualifications on the part of the nurse. The poor man must perforce keep within the limitations of his pocket-book. The industrial world, public health service, innumerable social activities, are calling for the highest type of educated nurse. The hospital training schools throughout the country have hitherto served the utilitarian purpose of securing an economical nursing force for the hospitals. The scarcity of nurses, the dearth of new candidates, the diversion of young women into other more lucrative and less exacting occupations, are pressing for a change in method.

This change will come in the way of higher standardization in the technical training offered, greater laboratory facilities, shorter hours, an increase in the number of accredited schools in the larger centers, a proportionate decrease in the number of indifferent schools, courses of instruction for trained attendants, in many of the smaller hospitals, a re-classification of the nursing force of the country into graduate nurses and trained attendants. In some such way as this will hospital training school development occur. Such was the line along which the medical schools progressed. The changes suggested will at first be unpopular with hospital managements, who are hard pressed for funds and who cannot get away from the exploitation of the pupil nurse as an economic saving to the hospital.

These proposed changes stand for the betterment of your great profession. They mean progression and not retrogression. They mean uniformity of standardization in all the states. They mean that a constantly increasing body of better educated young women will apply for admission to the nursing course. Our best training schools will become institutions of learning, qualified to prepare young women for the highest type of nursing service. This is an achievement worth attaining. It cannot be secured without coöperative effort on the part of the nursing profession. So I say to you, work for the highest ideals of your profession, for proper educational qualifications in the young women who are about to join your ranks, insist on uniformity of examination for registration in the several states, and for standards in training that will enable future graduates to successfully fill any of the responsible positions to which the graduate nurse of the present day may be called.

DEPARTMENT OF NURSING EDUCATION

LAURA R. LOGAN, R.N., DEPARTMENT EDITOR

Collaborators: Blanche Pfefferkorn, R.N., and Grace Watson, R.N.

PRELIMINARY REPORT ON UNIVERSITY SCHOOLS OF NURSING

(Continued from page 629, June Journal)

VI. STATUS OF THE NURSING SCHOOL OR DEPARTMENT IN THE UNIVERSITY AND ITS DIRECTION AND CONTROL

1. During the early experimental stages of development this new division of work has usually been placed under some existing university department. In Columbia University, the Nursing and Health Department has grown up in Teachers College, the School of Practical Arts; in Minnesota, Cincinnati, Indiana, and several other universities, the Nursing School has been a part of the Medical School; in British Columbia, the nursing students are in the School of Science, and in some other universities they are in the School of Liberal Arts.

2. Now that the idea has been accepted and the work clearly defined, it is important that the nursing school or department should, if possible, be given an independent status in order that it may have freedom for development along its own lines and not be submerged by the inevitable pressure of other claims and other interests.

3. Such a school or department should have a responsible head of its own, who will study its needs, foster its interests, and steadily build up its work in response to the needs of the field. The director or dean of such a department should undoubtedly be a nurse. She would need the highest educational and professional qualifications, together with a wide knowledge of both nursing and university work, good organizing ability, and the personality necessary to engage the support and coöperation of the university staff and to establish connections with the various university departments. The connections with institutions and organizations in the field are no less important and require a very broad grasp of modern nursing needs and conditions.

4. Where the university nursing school is connected with a special hospital the director will serve as superintendent of nurses in the hospital. If the hospital is at some distance from the university, there should be some responsible officer resident in the university to keep up the connection between the two divisions. Where the university has a well organized nursing department, but no university hospital, this department will probably make arrangements with selected hospitals and visiting nurse associations in the vicinity and will keep in constant touch with its own students during the whole course of training. Where there is no organized nursing department

within the university, it is difficult to see how any satisfactory course of study and training can be developed and carried out. No new branch of work can flourish if it is left to the casual attention of officers who have no great understanding of its needs. However small the group of nursing students may be, they will need constant advice and supervision in order to keep up their interest and make the connections which have to be made between their college and hospital work.

Cost of Maintenance:

1. In practically all universities some tuition fees are paid by students. These range from almost nothing to \$300 or more a year, but in few universities would more than one-third of the cost of tuition be covered by students' fees. The remainder would be provided for through private contributions, endowments, or through state funds, or both.

2. Students of a nursing school would be expected to pay the same fees as other students, as a rule. During the period of practical training in the hospital, the students' services to the hospital are usually considered a fair equivalent for her living expenses and also her tuition fees. At present there is no very satisfactory method of evaluating the pupil's services and the cost of her education in terms of dollars and cents. The financial arrangements for students in training are usually made between the hospital and the university and not by students themselves. In the five-year course, however, the student usually bears all the expenses of living and tuition fees except when she is at the hospital.

3. State or city universities which establish departments or schools of nursing will usually appropriate funds for that purpose. In other colleges or universities, it will probably be necessary to raise a sum of money to endow a new department such as this. The Department of Nursing and Health at Teachers College, Columbia University, received an endowment of \$200,000 from Mrs. Helen Hartley Jenkins, which has been devoted almost wholly to the cost of instruction; Yale University is asking for a million dollars to endow the New Haven School of Nursing which is to be a part of Yale University; the Alumnae of the Johns Hopkins Nursing School are now conducting a campaign for a million-dollar endowment for buildings, equipment and teaching expenses; the people of Cleveland are also expecting to start a campaign for an endowment for a nursing school to be connected with the Western Reserve University.

4. Where buildings and equipment are already available, a smaller endowment would make it possible to begin a department of this kind, but it should be clearly understood that no plan for a nursing

school or even an affiliation should be undertaken without assurance that the funds are available to put it on a basis which will command respect for its work and a good promise of development.

5. The nursing school or department will usually be able to draw upon other departments for a large share of its theoretical work. Sometimes this is given without expense to the department, but in some cases it is paid for on a regular basis. Nursing schools may get their science from the College of Liberal Arts, or the Medical School, nutrition and cookery from the Department of Home Economics, psychology from the Department of Education, and social science from the Department of Sociology. It will usually be necessary to have some adaptation of the regular college subjects to meet the special needs of the nursing group. The subjects dealing directly with nursing will have to be given by the Department of Nursing itself, which will probably have to provide also for certain technical subjects not already represented in the college curriculum.

6. An appropriate estimate of the actual costs of instruction to the university would not be less than \$100 per student per year, and under present conditions, with high overhead expenses, it would probably be a great deal more. The cost to the student varies a good deal, depending on the location of the university and the fees charged. It would range from \$500 to \$1,200 a year including maintenance.

Courses of Study:

1. The length of the combined academic and professional course generally agreed upon is about five years. The college years are about eight months in length. The hospital years are eleven months, allowing one month for vacation. By making greater use of the summer terms, it may be possible to reduce the total length of the course somewhat.

2. The arrangement varies. Some universities require the first three years for college work, followed by two years of hospital training. Others require the first two years in college work, then two years of general hospital training, then one year of specialized work which may be partly in the college and partly in the hospital or visiting nurse association. There are still other variations, as seen in the summary at the end.

3. It does not seem to be desirable to make specific recommendations about the exact order to be followed, but the following points should be considered:

(a) The students' interest.—How can it best be sustained through the whole course?

(b) The value to her of both college and hospital work.—How can she get the maximum out of both?

- (c) The desirability of specialization within the period assigned.—Some people advocate the basic professional course only before graduation with a period of specialization after. This might make it possible to shorten the combined course to four years.
- (d) Possible adjustments to meet the need of graduate nurses who wish to work for the degree.—Some universities allow the preliminary academic work to be taken later in such cases.

4. The subjects given in the first two (or three) years are mainly prescribed academic subjects, including the pre-nursing sciences. There is considerable variation in different universities, but the following would be considered as practically essential: Modern Language, English, History, Chemistry (Physica, if possible), General Biology or Zoölogy, Anatomy and Physiology, Bacteriology, Hygiene and Sanitation, Psychology, Sociology or Economics, and Physical Education.

5. If at all possible it is desirable to include also in this early college period (second year) the regular preparatory subjects which are required as soon as the student enters the hospital. Some of these may be given in the summer if necessary. Nutrition and Cookery, Elementary Materia Medica, Elementary Nursing and Hospital Housekeeping, and History of Nursing.

6. It is suggested that the student should, if possible, spend a part of the summer (possibly one month) between her first and second college years in the hospital in order to get a general idea of the work and test her fitness for it. It would eliminate the unfit girl before she goes any further and would increase the interest and understanding of the acceptable students, who will gain a good background for their second year's work.

7. After her preparatory subjects are all completed, the student will enter the hospital (probably in the second summer) and will be ready to go on with the regular professional curriculum in the fall. The subjects which are generally accepted as necessary in any good nursing school, are outlined in "The Standard Curriculum of Schools of Nursing." It would be assumed, however, that a university school would be able to set a rather higher standard than that of the average nursing school, particularly in extending the number of hours. All the main courses such as Materia Medica, Medical Nursing, Surgical Nursing, Obstetrical Nursing, etc., should be raised to at least two point or 30 hour courses, while the shorter series of lectures might be grouped together to make a standard college course.

8. By the end of the second year of hospital training, the student should know which of the main branches of nursing work she is most

interested in, and, if specialization at this point is considered desirable, she will elect her final year accordingly. If it is public health nursing, she will probably spend about half the year in studying the fundamental principles, and the other half in practical work in the field. If it is teaching or supervising work, in hospitals, she should follow a somewhat similar programme, except that her practical experience will be in the hospital, assisting in the teaching and supervision of the preliminary classes and, if possible, getting some practice as head nurse on the wards.

9. The practical experience or field work should be carefully arranged in order to insure a properly balanced and varied programme, and in order to see that the students' needs are met so far as at all possible throughout. Whatever excuses may be offered for the ordinary hospital in its use of student nurses, a university school of nursing would be expected to place the educational interests of its students first, and to see that whatever supplementary forces are necessary for the work of the hospital will be supplied, without drawing on its student body for unnecessary services. The same conditions would be expected in a visiting nurse association which offers training to student nurses.

10. An essential requirement of all such practice work which is to be really educational, is the employment of competent supervisors who are really educators and not just "foremen" of a group of workers. It is unnecessary to say that they should all be registered nurses with high educational qualifications. Such supervisors should be considered a part of the university staff and there may be need for coördinators as well to go between the university and the hospital and tie up the one constantly with the other.

University Credit:

1. The basis of credit in most American colleges is the point system, in which 1 point represents one hour of class or lecture work weekly for a period of about 15 weeks (one semester) or two hours of laboratory work for the same time. The average credit given for one year of college work will be from 30 to 36 points. The requirement for the A.B. or B.S. degree on this basis is about 124 points or approximately four college years.

2. Where the college year is divided into trimesters or quarters instead of semesters, the value of the point is changed but the total requirement for the degree remains practically the same in total hours.

3. The basis of credit for nursing courses would be exactly the same as for other college courses, on condition that they measure up to the standards already outlined for college work.

4. It is more difficult to find a basis of credit for the practical

work of the hospital. No matter how valuable we may conceive this practical work to be, no college would allow any large proportion of its credits for the degree to be assigned to any highly specialized form of technical work, whether it be music or art or physical training, or nursing. Some universities are allowing 1 point for each month of supervised practice in the hospital, which gives a minimum of from 22 to 24 points for the two years' hospital training, exclusive of all the class and lecture work during that period. Experience in a visiting nursing association would be on the same general basis. It would seem to be advisable to limit the credit allowed for practical experience to about 30 points, at most, out of a total of 124 points for the degree.

University Recognition; Degrees and Diplomas:

1. Universities award various kinds of degrees, some standing for academic distinctions and some for professional qualifications.

2. The A.B. degree (Bachelor of Arts) of most colleges and universities is generally understood to represent the older standards of a liberal education with the main emphasis on such subjects as Literature, Language, History and Philosophy.

3. The B.S. degree (Bachelor of Science) came with the increased emphasis on Biology, Physics, Chemistry, Mathematics, and other sciences. In several colleges, it has come to be used to cover various branches of applied science, such as Agriculture, Household Science and sometimes teaching.

4. The professional degrees may or may not be built on the A.B. or the B.S. degrees. Some of the familiar professional degrees are M.D. (Doctor of Medicine), Ph.G. (Graduate in Pharmacy), C.E. (Civil Engineer). Occasionally the professional symbol is added to the B.S., as in B.S.Ag. (Bachelor of Science in Agriculture).

5. In giving a degree to nursing students, a university may give one of its general degrees (B.S. or A.B.) or may give a special degree in nursing (B.N. or G.N.) which would indicate that the student had won a recognized standing in nursing, but would not necessarily indicate that she had received the fundamentals of a general college training in English, Literature, Language, etc. The general preference seems to be for the B.S. degree which has a recognized standing in many fields, accompanied by a diploma which testifies to the special professional training.

6. The M.S. (Master of Science) and A.M. (Master of Arts) degrees would be given to students who have already won their A.B. or B.S. degrees, possibly before entering training. This usually requires one full year of college work of an advanced grade which may be devoted partly to advanced work in nursing subjects, and partly to required academic subjects.

(To be continued.)

DEPARTMENT OF RED CROSS NURSING

CLARA D. NOYES, R.N., DEPARTMENT EDITOR

*Director, Department of Nursing, American Red Cross
Washington, D. C.*

Who has not dreamed of Constantinople as a city rich in history, a city of mystery and dreadful deeds, of mosques and minarets and veiled Turkish women, of bazaars filled with oriental rugs and wonderful embroideries and jewels? It is all this, but at present it is more, for after centuries of Turkish rule it is now under Allied control,—French, English, Greek and Italian,—with British war ships in the harbor, and an occasional American man-of-war. British Tommies guide the traffic and in their own emphatic Tommy English, swat stick in hand, struggle with all nationalities from the Sheik from the desert—leading or riding his camel—to the high powered cars of the representatives of America, Japan, France and other countries.

Under the Allied control the city has been given a spring cleaning, while there may be hidden abominations, the streets were wonderfully clean and even the dogs, the street cleaning department of the former Turkish Government, have all disappeared. The dog to the Turk is a sacred animal, hence to kill him would be murder. Therefore, when the order went forth that they must be disposed of the Turks, loaded them into boats and transported them to the rocky and uninhabited island of Proti, where they slowly starved to death or were devoured by each other. Consistency, not to mention humanity, is apparently not a Turkish characteristic.

It was not with such matters that we were primarily concerned for there were many Red Cross nurses in and around Constantinople, about thirty with those of the Near East Relief, a few of whom were engaged in important activities in and around the city. Miss McQuaide, with Dr. Graves, a woman physician, had established six Child Welfare Stations in the poorer districts. Women and children came in large numbers to these clinics for examination and advice. As elsewhere, under and improper feeding was the rule. Clothing and simple food, such as milk, cocoa and rice were distributed to the mothers. The patients were also followed to their homes. In order to do this efficiently Miss McQuaide had taught a group of perhaps ten young women, Armenians and Greeks, to act as assistants. They seemed eager and competent. They were neatly uniformed and expressed a great desire to study nursing. Four were already making preparation to come to America for this purpose.

Miss Emma Wood was acting as Chief Nurse to the Near East Relief and at the same time directing a large hospital for children

suffering with tuberculosis in its various forms at Yedi Kouli beyond the famous walls. It was located in a well constructed hospital building which had been loaned for this purpose. One would have at first thought believed herself in America. The wards, neat and well supplied, the outdoor sleeping porches, the dressing rooms, mess hall and well clothed children, spoke of efficient management and modern methods of treatment. Here again a group of native young women were being trained in the care of tuberculous patients. Farther up the Bosphorus, a trachoma hospital was rapidly developing. While in Constantinople in old Stamboul, Mrs. Rothrock, formerly superintendent of the Woman's Hospital and Training School in Fall River, with five Red Cross nurses, had performed a miracle. An old harem, illy suited for the purpose, had been converted into a modern institution, known as the American Hospital and in connection therewith she had laid the foundation of a school of nursing. Already four pupils had entered and others were expected. It would take too long to describe this institution in detail but with a strong committee; with President Patrick of the American College for Women; Representatives from Robert College for Men; The American Board of Missions; Admiral Mark A. Bristol, American High Commissioner in Command of American Naval Affairs, also Chairman of the Constantinople Chapter, American Red Cross; the Red Cross Commissioner; the Standard Oil Company and various other American business groups; all serving thereon, the hospital seems destined to play an important part in the community, not only as a hospital of eighty beds with clinics of all types, but as an educational center for native women, for the American College graduates and others who wish to prepare for nursing. Nurses are so sadly needed in that part of the world and while a few American nurses can organize schools, hospitals and child welfare work, they cannot stay and assume the entire responsibility. This should be done by the people themselves. The far reaching influence of the instruction given by the American College for Women and by Robert College for Men, is seen in the East wherever one goes. These schools, and others like them, have certainly played a very remarkable part in the development of the country and especially of the Balkan States.

A modern school of nursing has, like these, a wonderful opportunity in raising health standards in the same district, at the same time opening a new field of endeavor for native women. All these activities were later deflected toward the care of the Russian refugees who were packed on ships in the Harbor. These unfortunate people had fled from the Bolsheviki Army which had advanced into the Crimea against General Wrangel and his Army which retreated in

the face of overwhelming numbers. It was a heart-rending situation. The Russians,—about 150,000 men, women and children,—were packed into probably eighty ships so closely that it was impossible for them to lie down unless they “took turns.” The decks were crowded with people for whom there was insufficient food and water and inadequate or no shelter. They were exposed to rain and cold, for the nights were pitifully severe. Can you picture the misery! In this state, for it took endless time to decide their fate and make provision for their debarkation, it has been estimated that many remained over forty days! Nearly a month later we overtook some of the ships at Ragusa on the Dalmatian coast of the Adriatic, with the same people still on them. Yet they seemed cheerful and when asked how they had been able to retain their courage, they invariably smiled and said, “Think what we have escaped!” It was a pitiful situation, for their future seemed, to us at least, almost without hope.

The war ridden and exhausted countries to which these refugees were being sent were already overburdened with a war orphan and a refugee problem of their own. Recent reports from Constantinople state that the situation is still very acute, and that clothing is greatly needed as well as food.

The nurses in Constantinople have all returned to their own particular jobs and, while they are still concerned with this type of relief work, they are once more building, little by little, toward permanent health organizations and a better understanding, on the part of the natives, of hygiene and higher standards of living.

DELANO MEMORIAL NURSES

One of the most important matters considered at the recent meeting of the National Committee on Red Cross Nursing Service was the legacy left by Jane A. Delano for the support of public health nurses in rural districts. In addition to the income from \$25,000.00, the royalties from the sale of the textbooks on Home Hygiene and Care of the Sick, are by the terms of the will to be used for this purpose. Nurses appointed will be known as “Delano Memorial Nurses”. The National Committee is now working on a plan for the use of this money, which will be given in detail as soon as it is completed. Nurses who are selected as Memorial Nurses should consider it a great honor to be asked to carry on a form of work in which Miss Delano was herself so much interested, the care of the poorer people in remote rural districts.

The National Committee also considered the use of the public health Red Cross Scholarships. The last appropriation for this purpose had been unrestricted. It was voted, however, to restrict the next appropriation to those who are willing to perform, upon the

completion of the course, a year in public health nursing under the auspices of the American Red Cross.

The provisional enrollment for public health nurses, established during the war, which permitted a nurse to make application and to accept an assignment even though she did not meet the full requirements for complete enrollment, was carefully considered, and recommended for continuance, with the understanding that this enrollment be limited to one year, when it would automatically cease unless a nurse entered a course to prepare herself for public health nursing. Appointment cards and badges are not issued to nurses who are provisionally enrolled. However, if they are serving the American Red Cross, they may wear the uniform and be known as Red Cross public health nurses.

The use and misuse of the Red Cross badge, which has become a sacred emblem of service, was also discussed. Hundreds of these badges are lost during the year, which led the National Committee to believe that they were being carelessly worn. Every effort will be made by the Red Cross to see that the catch is strong, and in this way avoid some of the losses.

Regulations for Wearing the Badge of the Red Cross Nursing Service are being issued to all new enrollments, and are as follows:

Each nurse receiving a badge should make every effort to protect it against misuse and loss. In order to do this we call your attention to the regulations governing its use as approved by the National Committee on Red Cross Nursing Service, April 23, 1921.

FIRST: It may be worn by an enrolled Red Cross Nurse only, and then as a badge and not as a pin.

SECOND: When in Red Cross uniform it may be worn:

- (a) With the indoor uniform to fasten the collar in front.
- (b) With the out-door uniform it may also be used to fasten the collar of the waist.
- (c) It may be worn two inches below and three inches to the left of the lower left hand point of the collar.

THIRD: It may be worn at a Red Cross function with civilian clothes or with evening dress. When worn in this way, it must not be used as a pin, but should be worn on the left of the waist, in relatively the same position as described in (c) above.

Your attention is directed to the paragraph regarding the badge in A.R.C. 703, the circular of information for nurses desiring to enroll with the Red Cross:

"The badge will remain at all times the property of the American Red Cross, and in case of resignation or annulment of appointment, it is to be returned by the nurse to National Headquarters Nursing Service. This may be done through the Division Director of Nursing Service. In the event of death, the badge should be returned by a relative, or by the administrator of the estate. The use of the badge is protected by an Act of Congress, and it must not be worn by any other than the person to whom it is issued. Duplicate badges to replace those lost or destroyed will be issued by National Headquarters upon a written statement of the nurse, and upon the payment of \$1.00."

FOREIGN DEPARTMENT

LAVINIA L. DOCK, R.N., DEPARTMENT EDITOR

A Modern Training School for Nurses in Jerusalem

BY ALICE L. SELIGSBURG

Travelers returning from the Holy Land, in telling us of what they have seen, are no longer limited to descriptions of the more or less picturesque decay of ancient glories, to oddities of travel in the Orient, to peculiar types of Moslem, Jew, and Christian, to quaint customs and costumes. Today, one sojourning or working in Palestine sees not only much that is reminiscent of the past, or characteristic of the East; but also much that is modern and Western and that points to a renaissance of the land, and a development that may make it the interpreter of East to West, and West to East. The local Advisory Council which the High Commissioner, Sir Herbert Samuel, calls into frequent conference, discusses roads, railways, harbors, systems of law, sanitation, education, etc.

In the year 1912, a small group of Jewish women in New York who were specially interested in Palestine, organized under the name Hadassah (Hadassah is the Hebrew name of Queen Esther) into a society that now numbers more than 13,000 members, distributed among one hundred and twelve Chapters in as many different cities. They took as their motto "The Healing of the Daughter of my People." (Jeremiah 8:22). Their objects were two fold:—in America, to foster Zionist ideals; in Palestine, to establish a system of medical social service. They began actual work in the East by sending two American trained nurses to Jerusalem early in 1913, who devoted themselves chiefly to maternity work (organization and supervision of midwives), to a campaign against trachoma among school-children, to district visiting nursing. During the war, Hadassah was called on also to send a trained nurse to the refugees' encampment in Alexandria.

Conditions in Palestine have always been peculiar in that most of the welfare activities that the country needed have been maintained by foreign agencies. During the war, many of these ceased to function. A number of hospitals were closed. To add to the distress, members of the medical profession who were not Ottoman citizens, were called to the colors of their respective countries; and Ottomans were drafted into the Turkish service. In this emergency, appeal after appeal came to the Zionist Organization of America to send a medical unit to Palestine; and when finally it became possible to do so, in the spring of 1918, Hadassah was asked to assemble the personnel and

equipment for a Unit of 43 physicians, sanitarians, dentists, nurses, etc., and to contribute toward its maintenance. The Unit reached its destination in August, 1918. Since then, it has opened non-sectarian hospitals and clinics in Jerusalem, Jaffa, Tiberias, Safed; has established clinics in a number of other towns; has stationed physicians and nurses in many Jewish villages, who work in a circuit of villages; has conducted anti-malaria campaigns; has instituted the medical examination and treatment of school-children; etc. The American Red Cross had sent a medical and social service Unit to Palestine in the year 1918; but this Unit disbanded the following year. The Zionist Unit is still operating.

Through the Medical Unit, Hadassah was enabled to execute a plan long cherished; namely, the foundation of a nurses' training school in Palestine. This was desirable for more than one reason. In the first place, the Orient needs professionally trained nurses. Why always call on Europe or America to supply them? Secondly, the members of the Unit could not remain indefinitely in Palestine. Its personnel would gradually have to be replaced by men and women permanently resident in the land. Why not train Palestinian girls to take over the work of the American nurses? Thirdly, the inhabitants of this land,—still so poor in industrial opportunities because so poor in capital and enterprise,—needed work above all else; and to open a new profession to the intelligent girls of the country, was to render a service thrice blessed. One more reason: to teach Palestinian girls to work and to become economically independent, was a means of elevating the position of woman in the Orient. When the training school was first opened, a young man hung about the hospital grounds, trying to waylay his sister, a pupil nurse. He threatened to commit violence upon his own or her person, unless she would at once return home with him,—so deeply did he feel the disgrace of having a woman of his family learn to work. Fortunately, it was possible for the head nurse to convince him of his folly, and the girl remained.

The Hadassah Training School is attached to the Rothschild Hospital (110 beds) in Jerusalem, one of the hospitals under the jurisdiction of the American Zionist Medical Unit. As both the hospital and the nurses' residence are too small to accommodate all of the fifty-seven pupils, each girl receives part of her practical training at the Unit's 50 bed hospital in Safed, but all theoretical work is done, and most of the practice, in Jerusalem. The course of training lasts three years, and the studies include anatomy, materia medica, theory of nursing, dietetics, bacteriology, hygiene, lectures on internal medicine, obstetrics, pediatrics, and surgical nursing; periods of three

months each are devoted to surgical, medical, obstetrical, and dermatological practice, and to work in the children's ward and the clinics.

To qualify for admission, applicants must be at least twenty-one years of age, graduates of a "gymnasium," (i. e., a school somewhat more advanced than our high school), conversant with Hebrew. The Hebrew of the Bible, with an enlarged vocabulary to meet modern needs, is the language of intercourse and instruction. Pupils are admitted in September and May; the probationary period is six months. Hours are from seven to seven with a free period of three hours daily, one-half day a week, and extra time off for milk in the morning and tea in the afternoon, necessitated by the poor health of the girls, many of whom suffered severely during the war. When the school first opened, the days of illness among forty pupils amounted to sixty or seventy a month; the present record is seven days' illness during one month among forty-three pupils at the same hospital. Although the superintendent of the Hadassah Training School, the graduate nurses, the head of the pupil nurses' home, are Americans, all the pupil nurses are Palestinian either by birth or adoption. They are earnest, intelligent, ambitious girls. The first class will be graduated in November, 1921. From among those who will receive diplomas, two will be awarded Hadassah scholarships and will be sent to the United States for special study in medical social service and in hospital management. These scholarships are granted in order that, within a few years Palestinian nurses may replace the American nurses in all departments of Hadassah's work.

Hadassah believes that there is no short quick cut to professional efficiency. Through insistence on a long probationary period, and three years of training in the country itself, and through the grant of stipends for postgraduate work in America, Hadassah expects to create a corps of nurses thoroughly trained in all the usual branches of the profession. Is it too much to hope that these young women will bring not only healing to sick bodies but also—in their contacts with all the peoples, races, sects of the Near East,—understanding of souls, reconciliation, interpretation of East to West, and Occident to the awakening Orient?

ENGLISH NEWS

HEADQUARTERS AND NURSES' CLUB OF THE ROYAL BRITISH NURSES' ASSOCIATION were opened on May 18 by the President, Her Royal Highness Princess Christian, accompanied by Her Highness Princess Marie Louise. On May 19 and 20 "open house" was held and visitors were conducted over the club. Although not yet officially open, a number of nurses have been in residence including two contingents of army nurses.

DEPARTMENT OF PUBLIC HEALTH NURSING

A. M. CARR, R. N., DEPARTMENT EDITOR

MAIN ISSUES OF THE YEAR IN THE FIELD OF PUBLIC HEALTH NURSING

BY EDNA L. FOLEY, R.N.

The main issues of the year in the public health nursing field are that it wants more nurses, better equipped nurses, more clearly defined and closely coordinated work between doctors and public health nurses, fewer patients, and a better educated public. There is too much preventable illness. Perhaps more legislation might help, but our public is not yet educated to an honest enforcement of such legislation as we have. The doctor, being a man, may swear at the quacks and cults that are entering his domain; the nurse, being a woman, may only wring her hands when she finds an indifferent health department, a smallpox patient attending school, or when she traces a child's blindness to neglected eye-infection of the new born. We have no law as yet that keeps city and state public health nurses out of the politicians' spoils basket, but such health laws as we have are so indifferently enforced that we have no reason to believe that more laws will give the public better public health nursing. Perhaps the remedy lies within ourselves. Legislation is sometimes a panacea, more often than not a soporific. So, the public health nursing field turns to the training schools for help and to the members of the League of Nursing Education for the solution of the problem.

In a recent paper discussing the relation between the specialist and the practitioner, an eminent physician closed by saying:

And I trust there has been manifest in this paper the thought that whatever we plan for specialist or practitioner, it must never be forgotten that the interest that is paramount is that of the patient.

And so naturally my theme resolves itself into Our Patients. Who are they? What do they ask of us? What are we giving them? As a public health nurse and a training school graduate, I can only answer the first question by saying: "Patients are our reason for being." If Eve had never tasted the apple, if Pandora had not lifted the lid, or if we were all Christian Scientists, presumably we should still require nurses, for the two greatest mysteries of human life would still have occurred, even in the Garden of Eden. I leave to makers of dictionaries the definition of the word "patient." To the average public health nurse, it has grown to embrace every other

¹Read at the meeting of the National League of Nursing Education held in Kansas City, Missouri, April 11-14, 1921.

human being except herself. Neither rich nor poor, well nor sick, escape her imaginary net.

What do our patients ask of us? Comfort, surcease from pain, gentle, deft handling; helpful instruction of the homely, practical kind; health; a chance to work and live as Americans should. A simple enough programme, seemingly, but how many hospitals have time to teach nurses to dress painlessly, extensive, loathsome, exquisitely painful wounds? In how many medical wards is the cardiac patient's rest, diet, and general care, of prime importance?

The atmosphere of many hospitals reminds me of an open-air school that I once inspected. Nearly all of the children ran afternoon temperatures which the physician could not explain. As I stood watching the youngsters, the teacher, a woman uncommonly well equipped to teach six grades at one time, talked very much like this: "Children, let me see how nicely you can put your papers away. Hurry, hurry, hurry. Children, show me how well you can do your number work. Hurry, hurry, hurry." These poor little tykes, each one with a tuberculous history or tendency, "hurried" in a state of breathless tension from morn till dewy eve. The teacher was a good woman, the children loved her, but she was no more fitted for her particular job than most of us are equipped to run aeroplanes.

So, when the patient asks "health" of the public health nurse, or of the physician either, for that matter, they are not always ready with the charm that produces results.

Dr. Green of the *Journal of the American Medical Association*, said before members of the Woman's City Club of Chicago recently that there was only one medical school in the country giving its students an opportunity for practical work in public health, although perhaps six or eight were giving theoretical work. We are doing better than that for nurses. At last counting, there were nineteen courses in public health nursing endorsed by the National Organization for Public Health Nursing and a larger number of hospitals annually are trying to give their senior students some theory or practice, or both, in public health nursing. That is the beginning of our incursion into the realms of preventive medicine; our attempt to meet the needs of the patient who asks only for "health." What we are giving our patients depends largely upon what we ourselves have been given, and here the public health nurse finds herself face to face with what may prove to be the crux of the whole situation. Public health means health for *all*. It means also protection from preventable diseases in schools, workshops and homes alike; instruction, education, and the foundation of health habits. Good health is the inalienable right of every citizen, man, woman, or child, and since this

vague, almost unknown quantity is the right of every citizen, should not good public health nurses be the concern of the laity, as well as of the handful of nurses who are struggling with this big problem? The National Organization for Public Health Nursing was founded in this belief. Its phenomenal growth during the last eight years came in response to the many and various demands made upon its personnel. Perhaps it is necessary to state that while its policies and programmes have been planned and executed almost entirely by public health nurses, its work has been financed largely by non-professional friends. In fact, only seven per cent of a large budget in 1919 came from its active membership.

It would be difficult, if not impossible, to measure the debt of public health nursing to certain generous, far-sighted citizens of Cleveland, Chicago, Boston, Philadelphia, New York and other cities. Their annual individual gifts have ranged from \$5.00 to \$34,000.00, and in time, vision and service they have given almost as generously as the nurses themselves.

Our magazine has been given and has been edited by lay-people all these years. Some of our best committee work and published reports have been done by non-professional members. Nor has all of our support come from individuals. The expense of the time, energy, thought and service given their various duties by officers, directors and committee members, has been invariably borne by the organizations employing them.

Consequently, the members of the National Organization of Public Health Nursing know how to value such volunteer service. We know, too, that nursing is the ephemeral element in public health,—the desire for health is here to stay. The demand for public health nurses grows annually, but it is becoming a trained demand. When the average community asks for a public health nurse, it wants a young woman with poise, initiative, good manners, resourcefulness, but it wants a nurse. It may get all the other things, but so often it does not get the nurse, the woman whose hands are willing to serve the physical needs of her patients. Does the fault lie with the public health nursing field, or with the hospital, that fewer and fewer nurses are willing to nurse? Must we go elsewhere for the people who are neither willing nor unprepared to nurse the sick? Does this mean that we shall have to leave the nursing care of the sick and helpless to the graduate of short courses, or shall we readjust both our training school and public health nursing methods so that we may have better nurses who will, at the same time, be sufficiently intelligent to have a social and health education added to their hospital training, using all

three eventually for the good of all kinds of patients and the greater glory of their profession?

The average American girl has ideals. She is good potential material. Inarticulate she may be but she is plastic, imitative, and desires to be useful. The shortage of the right kind of nurses that most institutions are facing now may be due as much to the lack of leadership as to the aftermath of the war.

No matter how much we shorten its hours, or soften its edges, nursing, like motherhood and teaching, will always be hard work. It will require courage, devotion and the missionary as well as the pioneer spirit. The sick, when they are not afraid of death, are the most notoriously ungrateful people alive. A woman can only nurse them for one or two reasons,—economic, or vocational. As a means of livelihood merely, nursing is a trade. It is not first cousin to a profession, but as a means of livelihood plus a means of rendering service, nursing, wherever done, is an act of mercy, and that is considerably better than a mere profession.

As public health nursing has developed during the past year, it has clearly demonstrated three services that the League of Nursing Education, because of its first-hand contact with the laity, the medical profession and the pupil nurse, may render nursing and nurses. It can aid in bringing about a closer, more intimate contact with non-professionals, both individuals and groups. It can effect between physicians and nurses a better understanding of their singleness of ultimate aim,—well patients. And last, and by no means least, it can recommend and possibly bring about a readjustment of the hospital training of nurses so that they will be given an opportunity to prepare to specialize and will be taught to appreciate the dignity of their calling and the extent of the service they are being equipped to offer their fellow men. This work rightly belongs to the League of Nursing Education.

ISABEL HAMPTON ROBB SCHOLARSHIPS AWARDED

THE ISABEL HAMPTON ROBB MEMORIAL FUND SCHOLARSHIPS for 1921-22 have been awarded to the following six candidates who stood highest on the list of twenty applicants: Alice Marsh, West Newton, Mass.; Faith A. Collins, Corry, Pa.; Helen A. Sparks, Chicago, Ill.; Helen M. Burns, Rochester, N. Y.; Elsie A. Duncan, New York City; Louise Gliem, New York City.

TOO LATE FOR CLASSIFICATION

THE MONTANA STATE ASSOCIATION OF GRADUATE NURSES will convene at Billings, on July 11, 12, and probably 13, more or less in joint session with the Medical Association and the State Public Health Association.

HOSPITAL AND TRAINING SCHOOL ADMINISTRATION

ALICE SHEPARD GILMAN, R.N., DEPARTMENT EDITOR
Samaritan Hospital, Troy, N. Y.

EQUIPMENT FOR NURSING PROCEDURES BY AMY M. HILLIARD, R.N.

When so much has been written of standardisation of hospital equipment, it is a disheartening fact to find that relatively few of our hospitals have achieved anything like satisfactory equipment for nursing. This is not only true of the small struggling hospital, but it is very often true of hospitals that have very complete operating room suites, X-ray, hydrotherapeutic, electrotherapeutic and laboratory departments. It is not usually due to any fault of the community or of the Boards of Managers of such hospitals, but to the lack of good housekeeping, inventories, and accounting. There is rarely any inadequacy in kitchen equipment, nor in the realization that such equipment should be accounted for and replaced whenever necessary. Everybody understands that the hospital chef like every other cook must have the proper equipment and utensils to use if he is to render satisfactory service. Kitchens have been more or less standardized by hotels and numerous other institutions and hospitals have taken advantage of the experience gained by others. Considerable thought has been given to the location, lighting and ventilation of kitchens, serving rooms and pantries and to their equipment for the preparation and serving of food.

What about the location of utility rooms, linen closets and treatment rooms? Are they not usually inconveniently located without much thought having been given to economy of effort? Are they not of equal importance in the nursing care of our patients? Is this not the time to give careful consideration to the conservation of effort of both nurses and employees? Unfortunately there has been no standardization of either nursing procedures nor of the equipment necessary for the nursing care of hospital patients. For the most part the purchase and installation of the equipment for nursing has been left to individual superintendents of schools of nursing, many of whom undertake such executive work without the preparation which comes from acting as an assistant superintendent in schools recognized for a high standard of nursing. How can we expect good nursing if reasonable supervision and equipment are lacking?

To illustrate,—When acting as inspector of nurse training schools of New York State, I found it was the exception rather than

the rule to find face basins, surgical basins, stupe basins, dusting basins, etc., divided into sets and marked for the purpose for which they were to be used. In hospital after hospital I found, when I asked to be shown the basins used for morning and evening care of patients, that I would be conducted to the lavatory and be shown a group of basins numbering from two to three or perhaps a dozen to fifteen differing in size, shape and color, and when I asked for surgical basins, the supervising nurse would look embarrassed and then extract several basins from this group. When the dust basins were asked for, they were very rarely found at all. It was my experience to find that in many hospitals the same basin would successively be used for bathing patients, for stupes, for lavage, for enemas or for dusting as the need might be. This was not always because there was necessity for lack of equipment, but because there was poor organization, poor house-keeping and consequently questionable nursing.

If a grey colored basin be always used for dusting and one be provided for each student on the ward and all be hung up with dusters in a maid's closet or some other convenient place away from all other basins, it has been my experience that the students will use them and not the other basins for dusting. If the stupe basins are hung near the gas or electric stoves it will be found more convenient to use them legitimately than to ruin the face basins or surgical basins by placing them on stoves. If the face basins are required to be kept in the linen closet they are likely to be put away clean and dry and are not apt to be used for other purposes.

The possibility of carrying infection from patient to patient by indiscriminate use of basins, as well as the extravagance in destroying good basins by allowing them to be used for one purpose after the other,—for boiling stupes, instruments, catheters or anything else,—is too great to be over looked. What is true of basins is equally true of other equipment. Only within the past year I found typhoid dishes being boiled in a foot tub in a lavatory in a hospital that had an exceptionally fine system for sterilization of dishes, the reason given being that they did not wish to contaminate the other dishes by boiling typhoid dishes with them. How many of our pantries have a really adequate system for sterilization of dishes? It was always a source of astonishment to me to find how many hospitals made no provision for cleaning and boiling soiled instruments other than the pantry sink where dishes were washed and on the pantry stove where food was prepared.

In how many hospitals will we find provision in utility rooms for filling ice caps for typhoid patients? Are they not frequently taken to the pantry and filled? Should such things be taken into the pantry

where milk and other food is served when we are taught that typhoid is an intestinal infection and the infection taken in food and water?

I do not believe that after the initial expense that the upkeep of good standard equipment is greater than the haphazard buying of whatever happens to be most inexpensive at the time. Utensils plainly marked for the ward in which they are to be used will reduce indiscriminate borrowing to a minimum. A volunteer worker can do all the marking for the hospital once weekly on the morning for replacement of equipment and supplies. It is not easy for a basin marked with black paint "M. S. W." to stray far from the Men's Surgical Ward without detection and if in addition it has marked on it the word "Stupe", "Enema", or "Medicine Glasses Only", an additional safeguard is given, and, what is of the greatest importance, each basin by being limited to the use for which it was purchased will be at hand for this purpose when it is needed.

It is neither intelligent nor fair to teach the use of ideal equipment in a classroom and fail to provide it on wards. If the classroom teaching in practical nursing is not absolutely relevant to the ward work it is worse than useless, as we all know that student nurses must be held rigidly to their teaching if our patients are to be well cared for and in the end if our students are to become efficient graduate nurses.

A further help in good nursing will be found in providing an adequate supply of equipment for patients on "precaution." If a ward of twenty beds is standardized with an equipment of six bed pans for instance, and one is isolated for a typhoid case, another for a specific case and another for some patient under observation pending diagnosis, it can readily be seen that half of the equipment may be tied up to the great inconvenience of the other seventeen patients. As isolation equipment needs more frequent boiling it is economy to use the older utensils and have them plainly marked "isolation only" and kept separate from other equipment.

Curiously enough, the pavilion for private patients is one of the most deficiently equipped of all the hospital departments and in consequence we hear much of the transgressions of the graduate special nurse. Why should the graduate nurse on special duty be such a disorganizing influence in the hospital? I believe it to be largely because no thought has been given to her in the general scheme of building and equipment of most of our pavilions for private patients. There is seldom any legitimate place for her to dress and undress; there is no place for her to go other than the chart office when her patient has guests and there are seldom any dishes or utensils for her to use other than those in general use by the students.

A central dressing and locker room should be provided for graduate nurses so that they need not be humiliated by being obliged to dress and undress in the rooms of patients, but Solomon himself would need to be resurrected if we are to find a suitable resting place for the special nurse when she must be away from her patient. The noisy chart room (where nurses congregate to write charts and where internes and attending staff go to write orders and where, incidentally there will be more or less irrelevant conversation) has been brought to our attention by more than one patient or her friends. One thing, however, that may obtain in every room is complete equipment for the patient with each piece marked for the room. If when room No. 2 is made ready for occupancy it contains a bed pan, with cover, back wash and talcum, a small dressing basin, an emesis basin and rubber, each marked No. 2, it will help considerably to eliminate the possibility of borrowing these utensils from other departments. If, in addition, each room has a thermos bottle, the patient will always have cold water near at hand. I have found it very practical to keep in each room a cup, saucer, plate, spoon and drinking glass. The china is a distinct pattern and different from that used on food trays and each piece has the number of the room painted on the bottom. In this way it is never necessary to deplete food trays of the china, glass or silver and a better count can be kept. If each room has two bath sheets or blankets and an extra dark colored blanket for use of the patient when convalescing, it is very improbable that the expensive white bed blankets will be used illegitimately. There is no use berating graduate nurses for misusing utensils or for surreptitiously borrowing if proper equipment is not provided for them to care for their patients. It surely must be as great a handicap for them to be obliged to search for each utensil needed as it is for the hospital to have to hunt for such utensils after she has used them.

However, no matter how complete the equipment is, it will melt away as hail in the summer unless systematically inventoried. Once weekly, we find to be not too often for this purpose. Equipment must be checked up regularly, the same day each week by the principal of the school and the supervisor of the department. Every inventory should be checked and dated in the ward manual and replacement made where indicated and breakage accounted for. Where this is regularly done and a loose leaf manual kept showing the ward equipment, the inventories and replacement of breakage, I have found that there is little difficulty in accounting for each individual piece of equipment, in keeping it where it belongs and in having it used for the purpose for which it was originally intended.

LETTERS TO THE EDITOR

The editor is not responsible for opinions expressed in this department. All communications must be accompanied by the name and address of the writer to ensure publication.

ATHLETICS IN THE ARMY SCHOOL OF NURSING

Dear Editor: If, some night this last winter, you could have popped into one of the barracks of the Army School of Nursing at the Walter Reed Hospital about 7:15 p. m., you would have thought you were truly back in college. Work was over for the day and all the students were hurrying out of blue uniforms into warm clothes,—for it would be a cold ride to town in an ambulance. Everyone was going to a basketball game, to help cheer her school team on to victory,—the chief nurse, the supervisors, and ever so many students! This game might have been one of the “home games” played in the big “Y” or in the Red Cross House, for here the Army students played such teams as George Washington University, Wilson Normal School, War Risk Insurance teams, and many others. Probably the idea of physical culture in a School of Nursing is something entirely new to you, but to Army students it is a story almost three years old. Just that long ago the Blue Birds, as they are called, arrived in Army cantonments and posts all over this country, and as a side issue to their training, began the development of organized athletic activities. How awkward they felt when an imposing officer first gave them the command, “Hips firm, on your toes raise, knees bend!” and how many of them lost their balance! But a little time spent every day in “setting up exercises” soon brought them to the stage where they no longer felt they were “upsetting exercises.” This initial step having been taken, next came advanced military drill, and almost any day on the parade ground you could see a company of students executing “right front into line” with apparent ease. At some of the camps the students also procured, through their social directors, opportunities to develop their ideas in aesthetic dancing.

Of all the facilities that the camps and posts have offered for participation in various forms of athletics, probably none are more popular with the average student than the open-air swimming pools and the tennis courts. The more adventurous students enjoy horseback riding, and many an enthusiastic fan turns out for baseball. Many of the students, returning from civilian affiliations, expressed their appreciation of similar opportunities in a few of these hospitals. These forms of athletics have had a three-fold value in the Army School of Nursing. Physically, the students speak for themselves, as on the whole, they are healthy, energetic, and well developed. Interscholastic games have removed the barrier between a nursing school and other institutions of learning. Aside from this social value, the mental relaxation which follows such activity is of decided importance. Organized athletics have proved such a success in the Army School of Nursing and in some other nursing schools, that in time they will be included in the Standard Nursing Curriculum.

J. C. S.

FROM THE U. S. S. RELIEF

II.

Of course, we reached the reservation for the ball game I temptingly told you about, arriving some time before the game was called. We saw many interesting by-plays; the arrival of the Secretary and our Commander-in-chief, who came promptly and were properly welcomed, and the welcome extended to our

Secretary is something thrilling, we would have you know, and the spirit of true comradeship affected even the most stoical of us. But it is the ship and not a ball game which I am showing you and we must start at once. I fear we will not even complete our tour of inspection today. Here, on the second deck aft are two wards of forty beds each for the isolation and care of specific cases. Connecting is a treatment room completely fitted with the necessary instruments and equipment. The isolation is all that the most careful medical officer may desire, and yet the wards are bright and airy. The laundry is near by and you will agree with me that no hospital ashore has one that is better built or more fully equipped. It extends across the ship, thereby getting as much air and light as is possible. The tile decks and white bulkheads spell cleanliness. On the port side are two immense washers, two extractors and two tumbler dryers. In the center is the drying room and the huge starch kettle. On the starboard side are electric irons and boards of every conceivable shape; also the big mangles. Below is the linen sorting room, and across the passage from this is the linen repair room fitted out with electric sewing machines and electric markers. Opening from the repair room is the main linen room which also extends across the ship, and is not the supply such as would gladden the heart of any superintendent? Now, we will take this ladder back to the second deck. Glance in here. It is the "bag room" where all bags and hammocks of incoming patients are taken and kept, after being sealed and placed in the locker. The brass baggage tag is carefully guarded and the patient has the key to his clothes locker to which he may obtain entrance at stated times. Here is a convalescent mess hall run on the cafeteria system. We all know the advantage by this method in obtaining hot food, quick service, and elimination of waste. Now, we will leave the ladder, since it is somewhat difficult to climb, and take the main elevator which connects all decks from the superstructure to the medical store room. This room is worth seeing. We are the source of medical supplies for the Fleet, so you need not be surprised at the large size of the store room. Notice how carefully the bottles on the port side are packed, so that they will not fall against one another nor off the shelves. On the starboard side (yes, I love to roll out these nautical terms) is a room packed with gauze, cotton, stationery, rubber boots, etc. The narcotic locker is between the two rooms and here are safely stored all narcotics, alcoholics, and poisons. Before we return to the main deck, let me show you the hold. Here is stored a field hospital including tents, ovens, ambulance,—everything complete for a 200-bed hospital. We cannot look down, as it is closed and requires ten men to open it. Now, we will return to the main deck; you remember you came aboard here. Had you been a Navy nurse, you would have saluted the flag as you came over the side. We are all thrilled when we perform this act of honor. There is no other act which makes us feel intrinsically a part of the Naval Service as does the salute to our flag. I confess, however, that the first time of going over the side on leave and saluting made me feel that every ship had a spy glass turned on me and even the fish were watching. We will not go further on our inspection today. It is too hot; but let me tell you about our experience when we proceeded independently after following the Fleet out of "Hungry Gulf," a good name for Guacanayabo Bay. We saw the ships manœuvring that evening and the next morning (practice, you know, with real battle problems, but no real casualties) I was working on the morning reports when the night nurse, coming off duty, exclaimed: "Oh, the whole fleet is swooping down on us!" From the deck we saw the destroyers literally scampering around to the starboard while the Battle Wagons were on the port side. The

Commander-in-Chief signaled our captain "to get off the range," which we promptly did, *after we were sunk!* We moved on to a quiet anchorage and the day after the destroyers came in led by the U. S. S. ROCHESTER, looking from our distance exactly like an old hen with her chicks. In a few days, the Battle Wagons came and we felt home-like and were happy. The men caught an eight-foot shark from the stern of the RELIEF and the officers would take a fishing chance in the early morning hours, but it was trolling sport and the weight of the line was about 50 pounds dragging. The sight of their hands did not appeal to us so we crossed that diversion off the list. We will finish the inspection on our way north but before leaving you this time I must tell you that our mess is a success and we have money in the treasury! Also, we have had good food and many guests, for we have "returned courtesies." It will be good to start North.

J. B. B.

THE PRESENT DAY SHORTAGE OF STUDENT NURSES

Dear Editor: This question has been discussed by women far more capable than I but, having been in bed for seven weeks in a Cleveland hospital with more time to think than anything else, I have observed some reasons, I think, for the present shortage of nurses. The student nurses in this institution have more liberties than in the average hospital, but so often I have heard, "I do not see how I can possibly get a chance to accomplish all of my studying in hours off duty"; or again, "I am just as tired this morning as when I went to bed last evening." Then there are problems for the nurse who is self-supporting. Again there is the question of poor food. Do not the nurses feel that they are more or less like machines driven at high speed to perform their daily tasks? On duty the supervisors too often stick to the old regime of accomplishing the work at any cost. Of course, I realize that there is a certain amount of work to be accomplished and that it must be done efficiently, but need it be of the slavish variety? If we, as supervisors, studied more deeply the psychology of human nature and applied those principles to our student nurses, would we not be better able to deal with the situation? We are all human,—why not give the other fellow a chance? Every day strides are being made toward higher education. Less scrubbing and less drudgery and more recreation is allowed. Still young women are not entering our schools. If every graduate nurse, either in private duty or institutional work, strove toward improving conditions in our training schools would we not sooner have a better class of young women entering our training schools to uphold the ideals of our profession?

Ohio.

L. E. E.

TEXTBOOK ON ETHICS OF NURSING

Dear Editor: I wonder if any of the readers of the Journal can furnish me with the title, author and publisher of the elementary textbook on "The Ethics of Nursing" which was used in the Connecticut Training School about the year 1905. The title may be "Nursing Primer" or "Nursing Ethics for Beginners." I have tried to locate this book for some time and I would appreciate it greatly if someone can tell me how I can obtain it.

Box 440, Wallingford, Conn.

FLORENCE E. BURGESS.

PRIVATE DUTY SECTIONS

Dear Editor: I am very interested to hear from states where Private Duty Sections have been formed. I should like to know the name of the officers and to obtain copies of their by-laws.

94 College Ave., West Somerville, Mass.

MINNIE HOLLINGSWORTH.

A GIFT FOR NEW GRADUATES

Dear Editor: Please send the American Journal of Nursing to the address enclosed, beginning the subscription with the June number as I am giving it as a graduating gift. I am trying to encourage others to do the same as I think it the nicest remembrance one can give a graduate nurse. I don't know what I would do without it for each year it seems better and it contains so much good information.

Kentucky.

I. B.

OLD COPIES OF THE JOURNAL

Old copies of the Journal may be obtained from the following:

Mabel Kitch, 146 West 18th Street, Apartment 1, Indianapolis, Indiana. All of 1920 and several 1917 copies.

Grace H. Pritchard, 128 Grand Avenue, Milwaukee, Wisconsin. November and December, 1916; all of 1917; January, February, May, June and December, 1918; all of 1919 except October; and all of 1920. These Journals may be had by paying postage on same.

Mrs. Gertrude D. Wells, 595 Lovejoy Street, Portland, Oregon. December, 1918; all of 1919 except January and February; all of 1920 except July; and January through May, 1921. These Journals may be had by paying postage on them.

May Peters, Dexter, Michigan. Several complete volumes and several broken volumes.

WHO'S WHO IN THE NURSING WORLD

II. ADDA ELDRIDGE

Birthplace: Fond du Lac, Wis. Parentage: American. Present Position: Temporary member of the New York State Board of Nurse Examiners; assisting in passing on applicants under the waiver of the Nurse Practice Act. Education: High School. Graduate of: St. Luke's Training School for Nurses, Chicago, Ill. Postgraduate Work: Teachers College, Columbia University, New York City, one year. Positions Held: Private duty, eight years; Instructor, St. Luke's Training School for Nurses, Chicago, Ill., seven years; on the Nursing Staff of the Association for Improving the Conditions of the Poor, New York City, about one year; Interstate Secretary for the American Nurses' Association, The National League of Nursing Education and The American Journal of Nursing, three years; three months' temporary appointment to assist in assigning student nurses under the Committee on Nursing of the Council of Defense; temporary member of the New York State Board of Nurse Examiners, December, 1920, to present time. Offices: Lecturer for three months during 1907 in connection with the passage of the first Illinois law governing registration of nurses; Chairman of Illinois State Legislative Committee during 1913 when the law of that year was passed; President Illinois State Nurses' Association, 1911-1912; First Vice-president of the American Nurses' Association, 1913-1918; member of the Board of Directors of the American Nurses' Association, 1919 to present time. Author of: Papers on nursing subjects for meetings, conventions and magazines.

NURSING NEWS AND ANNOUNCEMENTS

News items must be received at the JOURNAL office before the 15th of the month in order to ensure publication in the JOURNAL of the following month.

NURSES' RELIEF FUND

RELIEF FUND DATA.—The Nurses' Relief Fund was started on June 3, 1911. The first benefit was given in 1914 when the fund had reached the sum of \$10,000. Nurses from twenty-six states have applied. Thirty-nine nurses have been helped and sixteen are now being helped. Ten of those who have been helped have died and eleven have withdrawn from the benefit. Part of the funeral expenses for one nurse has been paid and traveling expenses for one nurse have been paid. One alumnae association has raised \$1,000 for the benefit of one nurse and one district association has raised \$1,000 for a nurse.

REPORT FOR APRIL, 1921

Receipts

Previously acknowledged	\$3,436.46
Interest on bonds	65.00
Interest on Liberty Bonds	63.06
Cheque returned	5.00
A graduate nurse	4.00
Arizona: District Association No. 2	300.00
Arkansas: Mary C. Ledwidge, Little Rock	1.00
California: District No. 1, \$11; District No. 4, \$31; District No. 5, \$60; District No. 6, \$7; District No. 10, \$16; District No. 11, \$20; District No. 12, \$32; District No. 13, \$4.50; Beasia L. Hiltne, San Luis, \$1....	182.50
Connecticut: L. H. Cadwell, Newington	3.00
District of Columbia: Graduate Nurses' Association	65.00
Illinois: State Nurses' Association, \$11; District No. 3, \$75; Salome M. Dyson, Chicago, \$5	91.00
Michigan: State Nurses' Association	159.00
Missouri: Sara E. Parsons	10.00
Nebraska: The Visiting Nurses' Association	20.00
New Jersey: State Nurses' Association	15.00
New York: District Assn., No. 1, \$13; District No. 3,—Arnot-Ogden Training School, \$25; Arnot-Ogden Alumnae Assn., \$5; Ethel E. Thayer, \$5; E. G. Robinson, \$6; Alice E. Osborne, \$5; Gerda Lun- quist, \$6; District No. 7,—Florence E. McDermott, \$3.75; Maud E. Walters, \$5; Anna E. Brobson, \$1; District No. 9,—St. Peter's Hos- pital Al. Assn., Albany, \$25; District No. 12,—District Assn. No. 13, \$34; Mt. Sinai Hospital Tr. School Al. Assn., \$133.13; City Hospital School of Nursing Al. Assn., \$9; Agnes A. Johnston, \$1; Anna C. Maxwell, \$10; Mary A. Weiss, \$2; Josephine Robinson, \$3; Margaret Graham, \$10; Sarah J. Graham, \$10; Josephine Hughes, \$6; Barbara Kates, \$5; Mary E. Faragher, \$10; Rosabelle Jacobus, \$7; Margaret Campbell, \$5; Margaret Mitchell, \$6; Margaret Billinger, \$7.....	357.93
North Carolina: District Association No. 2	23.60
North Dakota: State Nurses' Association	47.00
Ohio: Bucyrus,—Naomi C. Hipp, Mildred Hussey and Mrs. Pearl Sutt. \$. \$1 each; Mary Lapsley, \$2	5.00

Oregon: State Nurses' Association	50.00
Pennsylvania: State Nurses' Association, \$745; Philadelphia,—St. Luke's Al. Assn., \$25; Lebanon,—Good Samaritan Hospital Al. Assn., \$5..	775.00
Tennessee: State Nurses' Association	182.00
Texas: State Nurses' Association	100.00

\$5,975.55

Disbursements

Paid to 16 applicants	\$260.00	
Exchange on cheques70	
Postage	10.00	
10,000 leaflets	35.00	305.70

\$5,669.85

Invested funds, par value	36,550.00
---------------------------------	-----------

\$42,219.85

Contributions for the Relief Fund should be sent to Mrs. C. V. Twiss, Treasurer, 14 East 50th Street, New York, and the cheques made payable to the Farmers Loan and Trust Company, New York City. For information, address E. E. Golding, chairman, 317 West 45th Street, New York City.

M. LOUISE TWISS, *Treasurer*.

**MEMORIAL FUND FOR THE NIGHTINGALE SCHOOL
BORDEAUX, FRANCE**

(Contributions received up to June 15, 1921)

Previously acknowledged	\$50,945.85
Illinois	23.00
Oklahoma	23.25

\$50,992.10

AMERICAN NURSES' ASSOCIATION

THE AMERICAN NURSES' ASSOCIATION now has a membership of 39,931.

ADDRESSES WANTED

The Proceedings of the National League of Nursing Education, 1920, for the following named members have been returned for lack of proper address: J. F. Duncan, N. S. Parks, B. J. Borgmann, M. F. Huntley, Mary C. Collins, E. B. Seaman, J. M. Murdock, H. H. Seefort, L. C. McElderry, Maud Burke, E. M. Shellabarger, Minnie R. Ireland, Reta Johnson. It is the desire that each member shall receive her report and if a correct address of these members can be furnished the copy will be promptly forwarded. Address the ex-secretary, Alice H. Flash, Chief Nurse, Letterman General Hospital, Presidio of San Francisco, Calif.

ARMY NURSE CORPS

In May, 1921, the following named members of the Army Nurse Corps were ordered transferred to the stations indicated:—to Station Hospital, Carlisle Barracks, Pa., 2nd Lt., Margaret Evelyn Brown; to Station Hospital, Camp Dix, N. J., 2nd Lt., Grace L. McRill; to Station Hospital, Langley Field, Va., 1st Lt., Jenny L. Row, and 2nd Lts., Mary Theresa Manzer and Blanche B. Patrick; to

Letterman General Hospital, San Francisco, Calif., 2nd Lt., Genevieve Bergeson; to Station Hospital, Plattsburg Barracks, New York, 1st Lt., Grace E. Hill, 2nd Lt., Allie Frances Bachan, Josephine Harris, Minerva O'Neal, Alma Theresa Skoog, and Catherine Wolfe; to Walter Reed General Hospital, Takoma Park, D. C., 2nd Lt., Anna Reeves and Madge Hobbs Bihling; to the Hawaiian Department, 2nd Lt., Florence M. Bailey and Josephine Kennedy.

2nd Lt. Elizabeth M. Beedles has been appointed into the Corps and ordered to Walter Reed General Hospital.

Orders have been issued for the separation from the service of the following named nurses:—2nd Lt., Maud Bonar, Teresa Boyle, Adelaide Clapp, Gladys Clark, Margaret Clark, Eva G. Curovish, Justine M. Foustle, Mary Bella Frances, Emma Gilliams, Catherine B. Gross, Emma J. Hall, Hazel E. Hallett, Edith Head, Ruth Heagney, Caroline Heiman, Anna P. Hiller, Thekla B. Howe, Josie M. Johnson, Madeline Johnson, Pearle J. Justice, Sadie Anastasia Krause, May Yancey Long, Flora D. MacNaughten, Flores Masbach, Adelaide Montague, Claudia Moore, Eva Muirhead, Winifred S. Nichols, Alma Viola Obusey, Marcella V. O'Connor, Ann M. Poquette, Jeannette H. Rogers, Florence C. Rowley, Susanna H. Simonson, Susan P. Stauffer, Olive M. Stout, Marie K. Strobel, and G. Caroline Susag.

After a long and lingering illness, 2nd Lt., Emma Vanderburgh, Nurse, Army Nurse Corps, died on May 2, at Station Hospital, Fort Leavenworth, Kansas. She was buried on May 6 at that station, with military honors.

Inquiries have been made about the wearing of the uniform of the Army Nurse Corps by former members of the corps upon such occasions as military funerals, parades, etc. For the benefit of all who may be interested, the following information is given:

The blue serge street uniform with the insignia U. S. and A. N. C. caduceus is the proper dress. The insignia of rank (lieutenant's bars) may not be worn, as by law, members of the Corps only are entitled to them and when worn by a nurse, they are a sign of active duty in the Army. Service stripes are permitted. Victory Medals and other authorized decorations or service medals are allowed. Service buttons are not to be worn with uniform, as they are issued for civilian clothes only. Discharge stripes are not customary for nurses. The blue serge street uniform may be worn with either white or blue waists. The blue waist, however, should never be worn without a white collar. Collars of waists may be worn either up or down. Regulation uniform felt hats should be worn except in warm weather, when an absolutely plain black or blue straw sailor hat is permitted. Tan shoes and stockings and tan gloves are proper to wear with the blue uniform. The white indoor uniform with the Army cape is not proper for street wear.

Special flags for former Base Hospital Units have not been officially authorized.

JULIA C. STIMSON,

*Major, Superintendent, Army Nurse Corps, and
Dean, Army School of Nursing.*

NAVY NURSE CORPS

The following nurses have been appointed and assigned to the Naval Hospitals at the Stations indicated:—To Chelsea, Mass., Homer H. Terman, Mansfield, Ohio. To New York, N. Y. (Dispensary Navy Yard), Ellen M. Olson (re-appointment), New York, N. Y. To Puget Sound, Wash., Evelyn J. Earle, San

Francisco, Calif., and Louise R. Lobb, Seattle, Wash. *To Washington, D. C.*, Agnes M. Grant, Huntington, W. Va.

The following nurses have been transferred:—*To Annapolis, Md.* (Naval Dispensary), Eva B. Moss, Chief Nurse, Washington. *To Fort Lyon, Colo.*, Carrie B. Summerlin, Mare Island. *To Great Lakes, Ill.*, Alleen Lightner, Fort Lyon. *To Heintz (Field Hospital)*, Clara Klinksick, Washington; Frida Krook, Chief Nurse, New York (Supply Depot); Ellen M. Olson, New York (Dispensary Navy Yard). *To U. S. S. Henderson*, Minnie B. Irwin (temporary), Norfolk. *To League Island, Pa.*, C. Helen Scott, Norfolk. *To Mare Island, Calif.*, Katherine C. Hensen, Gulfport. *To U. S. S. Mercy*, Elizabeth H. Beall, San Diego. *To Norfolk, Va.*, Mary M. Heck, *U. S. S. Henderson*; Agnes M. Quinlan, Washington (Dispensary, Navy Yard). *To Philadelphia, Pa.* (Dispensary), Anna E. Gorham, Chief Nurse, League Island. *To Pensacola, Fla.*, Mary Lillian Moore, Gulfport. *To Washington, D. C.*, Blanche Browne, Chief Nurse, Gulfport.

Honorable Discharges.—Helen M. Kelley, Norfolk; Edith A. Oswald, Annapolis; Clara L. Thomas, Dispensary, Washington.

Resignations.—Margaret B. Angus, Chelsea; Edna R. Brown, Fort Lyon; Genevieve Poole, Washington; Mary M. Thornton, Fort Lyon; Jane C. Thorpe; Alice M. Wells, Washington.

LENAH S. HIGBIE,
Superintendent, Navy Nurse Corps.

U. S. PUBLIC HEALTH SERVICE NURSE CORPS

The following is information relative to nurses in the U. S. Public Health Service, for the month of May, 1921:

Transfers: Sue Wilson, Chief Nurse, Houston, No. 25, Josephine Gaffney, Assistant Chief Nurse, St. Paul, No. 65, and Carrie Schoff, Head Nurse, St. Paul, No. 65, to Helena Mont.; Margaret Reamy, Assistant Chief Nurse, Chicago, No. 30, transferred, Chief Nurse, Evansville, Ind.; Anna McFadden, Assistant Chief Nurse, Houston, No. 25, to St. Louis, No. 18; Ora Bruchmiller, Chief Nurse, Fort Bayard, No. 55, to Houston, No. 25; Elizabeth Welsh, Assistant Chief Nurse, New Orleans, No. 14, transferred, Chief Nurse, Mobile, No. 13; Marie Mortimer, Head Nurse, Baltimore, No. 56, transferred, Nurse Anaesthetist, Alexandria, No. 27; Marie Boyle, Head Nurse, Ellis Island, No. 43, to Stapleton, No. 21; Lillian Woodman, Head Nurse, Tucson, No. 51, to Houston, No. 25.

One hundred twenty-nine new appointments and thirteen reinstatements were recommended for approval during the month, making a total number of nurses on duty, 1,500. The new hospital at Helena, Montana, and the one at Colfax, Iowa, are opening. Medical officers have been assigned and nurses are now being recruited and assigned to these stations. The Recruiting Nurses of the Service, who are in the field recruiting nurses, are obtaining satisfactory results. A lecture course has recently been established in all the hospitals of the Public Health Service for nurses, aides, dietitians, and attendants. A copy of the schedule follows. These lectures are to be given by members of the staff, including the chief nurse, chief dietitian and chief aide, and it is hoped that they will give to the members of the Public Health Service some idea of the history of the past achievements and the present activity of the Service; a better knowledge of the Service regulations and through a better understanding of the ideals and work of the other departments of the Service, bring all members of the Service into a closer coöperation. An outline of a course in Psychiatry, which has been prepared by the Chief of the Neuro-Psychiatric Section and the Chief

Nurse of the Psychiatric Division will be published later, as will a copy of the proposed course of intensive instruction in tuberculosis nursing to be given at U. S. Public Health Service Hospital, No. 60, Oteen, N. C. It is expected to open this course for intensive training in tuberculosis nursing some time in the autumn and it is proposed to order to Oteen for this instruction the head nurse in tuberculosis wards of all general hospitals east of the Mississippi. This will mean fifteen nurses of the Service, and it is further proposed to open this course to fifteen nurses from civilian sanitariums or organizations, these nurses to be accepted upon the recommendation of the National Tuberculosis Association. These nurses will be given their course of instruction with quarters and subsistence during the length of the course, in return for the hours of duty which they will give on wards when not engaged in lectures and demonstrations. The organizations employing them will be expected to pay their salaries and transportation expenses. No application to take this course will be considered unless it has the sanction of the Tuberculosis Association. It is hoped that this course of instruction will be conducted by Alice Stewart of the Pittsburgh Tuberculosis Association.

WEEKLY LECTURE FOR PERSONNEL

1. Regulations as they affect nurses, aides and dietitians—Necessity for observance of same. 2. Methods of official approach to the Bureau. 3. Privileges and restrictions under Civil Service Regulations. 4. General history of establishment of Service, with enlargement of responsibilities and changes. 5. Additional functions added—what they are and why recommended. 6. Divisions and administration of same under S. G. Coordination of work of all divisions to make perfect whole. 7. Extra Cantonment Zone Work. 8. Other War Work. 9. V. D. Division. 10. Hygienic Laboratory—functions, etc. 11. Child Hygiene Department. 12. Rural Sanitation. 13. Quarantine, Domestic and Foreign. 14. Ellis Island—Relation to Emigration Bureau. 15. Public Health Service in Epidemics. 16. Research Work—Malaria. 17. Research Work—Yellow Fever—with history of various epidemics. 18. Poliomyelitis. 19. Pellagra. 20. Hookworm. 21. Typhoid Investigation—with pollution of streams. 22. Division of Hospitals and Relief Establishment. 23. Enlargement of Activities with passage of Act 326. Explanation of this Act. 24. Plan of Organization to care for Claimants—District Supervisor's Offices and Contract Hospitals. 25. Organization Plan for Marine and Public Health Service Hospitals. Differentiation of two groups. 26-30. Tuberculosis. 31-35. Neuro-psychiatry. 36-40. General Medical. 41-44. Surgery. Surgical Technique. Anaesthesia. 45. Organization and Growth of Dental Department. 46. Reconstruction Service—Physiotherapy. 47. Reconstruction Service—Occupational Therapy. 48-49. Dietetic. 50. Red Cross Activities. 51-52. Federal Board.

LUCY MINNICHROD, R.N.

Superintendent of Nurses, U. S. P. H. S.

Arizona.—The officers of the district associations are as follows: DISTRICT No. 1.—President, Gertrude Russell; secretary, Rose Benenato; treasurer, Serafina Righetta. DISTRICT No. 2.—President, Kathryn Mackay; secretary, Helen Dickerman; treasurer, Miriam Glover. DISTRICT No. 3.—President, Charlie Shotwell; secretary, Mrs. H. McGee. DISTRICT No. 4.—President, Louise E. Parritt; secretary, Grace Adkins; treasurer, H. Grace Franklin. TUCSON.—DISTRICT ASSOCIATION No. 2 held its first annual ball in April, when three hundred dollars was gathered for the Relief Fund. ST. MARY'S HOSPITAL SCHOOL OF NURSING

held graduation exercises May 26, when five students received diplomas. A reception followed the exercises. ST. MARY'S HOSPITAL ALUMNAE ASSOCIATION held its annual meeting on May 29. The following officers were elected: President, Helen Dickerman; vice-president, Violet Anderson; secretary, Amy Hendry; treasurer, M. Ryan.

Arkansas.—THE ARKANSAS STATE BOARD OF NURSE EXAMINERS held its annual meeting on May 10-11. Dr. Ogden was reelected president and Frankie Hutchinson, secretary-treasurer. Forty-two applicants wrote on the recent examination.

California.—THE BUREAU OF REGISTRATION OF NURSES has sent out the following notice: The bill providing amendments to the Nurse Registration Act was signed by the Governor on May 31, and will become law September 1, 1921, and will become effective as follows: (1) The fee for examination and registration will be Fifteen Dollars (\$15.00) after September 1, 1921. (2) Renewal of Certificate, January 1, 1922. (3) After July 1, 1923, applicants for examination must have had the required course of instruction and *twenty-eight* months of actual practice in the care of medical, surgical, obstetrical patients and sick children. This will apply to students in training from March 1, 1921, and to students who will be accepted from this date. Students who commenced their course prior to March 1, 1921, will come under the provision of the three-year course. (4) After September 1, 1921, applicants registered in other states or foreign countries may be registered in this State without examination, provided they meet the requirements of this state for registration.

Colorado: Colorado Springs.—ST. FRANCIS HOSPITAL celebrated the anniversary of the birth of Florence Nightingale on May 12. Addresses were given by Rev. Father Chamberland and Dr. J. F. McConnell, and a play, "The Probationer's Dream," was given by the student nurses in the training school. Harriet Friend wishes to deny the statement made in the June JOURNAL that she had accepted the position as superintendent of nurses of the Glockner Hospital.

Connecticut: Hartford.—ST. FRANCIS HOSPITAL celebrated Hospital Day on May 12. A requiem mass was held for deceased members of the alumnae association. During the open house hours members of the alumnae association aided the sisters in the reception and entertainment of visitors. THE ST. FRANCIS HOSPITAL ALUMNAE ASSOCIATION held its annual meeting in the afternoon, at which time the class of 1921, consisting of thirty-eight members was admitted into the association. Mabel A. Toome, acting president, spoke on Recruiting Student Nurses. Mary M. Moore, treasurer, reported that the minstrels given under the direction of the association had netted about \$1,400. This sum is to be added to the free bed fund. It was voted to hold a strawberry festival in the near future. Following the meeting Right Reverend John J. Nilan addressed the members of the association and the student nurses. A luncheon was served by the married members of the association. THE CLASS OF 1921 OF THE HARTFORD HOSPITAL TRAINING SCHOOL FOR NURSES added \$100 to the Lauder Sutherland Memorial Fund, which is to be used for educational purposes. The fund was begun by the class of 1920.

District of Columbia: Washington.—THE GRADUATE NURSES' ASSOCIATION OF THE DISTRICT OF COLUMBIA elected the following officers recently: President, Ida F. Butler; vice-president, Eleanor Maynard; secretary, Kathryn Hankins; treasurer, Charlotte Van Dusen. THE ARMY SCHOOL OF NURSING WALTER REED GENERAL HOSPITAL held graduating exercises on June 16, when 404 students received diplomas. Annie W. Goodrich gave the address. General John J. Pershing

presented the diplomas and gave an address. Many social events preceded commencement. THE COLUMBIA HOSPITAL TRAINING SCHOOL FOR NURSES held commencement exercises on May 19, at the Ebbitt, when sixteen pupils received their diplomas. Dr. Harvey W. Wiley addressed the graduating class. A reception followed the exercises. A reception was held for the graduating class by the Women's Board on May 12 and a commencement ball was held at the New Willard on May 11.

Florida.—FLORIDA STATE NURSES' ASSOCIATION held its annual meeting in Tampa last November. DISTRICT ASSOCIATION No. 2 held its annual meeting in Jacksonville on March 19. (This is to correct a statement made in the May JOURNAL.—Editor.) Mary D. Conoley has accepted a position as superintendent of the Morrell Memorial Hospital.

Illinois: Chicago.—THE CHICAGO HOSPITAL ALUMNAE ASSOCIATION at its meeting on May 11, elected the following officers: President, Mrs. Mary E. Johnson; vice-president, Caroline C. Small; secretary-treasurer, Mary A. Gallagher; assistant secretary-treasurer, Beryl Scott. The June meeting was in the form of a banquet held on June 8. The alumnae association gave a matinee party in honor of the graduating class on May 25, followed by a tea. JANE A. DELANO POST, AMERICAN LEGION, held its regular meeting on June 6th at the Chicago Nurses' Club. A carnival and reunion held by the Legionares Club of Chicago cleared two hundred and fifty dollars for the Post which is to be used for sick nurses who have seen service at home and overseas. ST. LUKE'S SCHOOL OF NURSING held commencement exercises on May 16. Dr. Joseph A. Capps gave the address. A NIGHTINGALE MEMORIAL SERVICE FOR NURSES was held in the Church of The Epiphany on May 22. The Rt. Reverend Charles P. Anderson, Bishop of the Diocese of Chicago, delivered the sermon. GRANT HOSPITAL held graduating exercises for the class of 1921 on May 31. Carol Martin gave the address. The Grant Hospital Alumnae Association entertained the graduating class at a dinner on June 15. Rockford.—THE ROCKFORD HOSPITAL ALUMNAE ASSOCIATION has established a fund, the interest on which is to be used for the purpose of helping student and graduate nurses to attain professional advancement. The fund is established in memory of the late Dr. Walter B. Helm, who was chief of the surgical staff of the hospital for many years. Springfield.—DISTRICT ASSOCIATION No. 13 held a meeting on May 3. Anna L. Tittman, graduate of the Springfield Hospital and Training School and at present second assistant to the Director of the Central Division of the Red Cross Nursing Service, gave a talk on her experiences with the American Red Cross in Siberia. Lula McCarver, class of 1912, Passavant Memorial Hospital, Jacksonville, is public health nurse for Pulaski County, Arkansas. Martha McCarver, class of 1920, Passavant Memorial Hospital, Jacksonville, is doing private duty in Little Rock, Arkansas. Myrtle Johnson, class of 1913, Passavant Memorial Hospital, Jacksonville, has accepted a position in Sherman Hospital, Sherman, Texas.

Indiana: Indianapolis.—THE BOARD OF DIRECTORS OF THE INDIANA STATE NURSES' ASSOCIATION recently voted to give \$500.00 toward the fund for the student nurse recruiting campaign to be started soon. The Methodist Hospital Training School for Nurses held graduating exercises for sixty-one students on June 10. Bishop Fredrick Louts gave the address. Previous to commencement exercises the class was entertained by the alumnae association, by the intermediates and by the faculty. The hospital expects to open a new wing in October which will increase the capacity of the hospital to 650 beds. Nancy Fry, former superintendent of nurses, Bloomington City Hospital, and Harriet Blankenhiller,

graduate of the Francis Williard Hospital, Chicago, were among the graduates of the College of Missions, and both expect to sail soon for China. Eunice Thomas and Katherine Donnelly, graduates of Fletcher Sanitarium, are doing private duty nursing in Colorado Springs, Colo. THE CITY HOSPITAL SCHOOL OF NURSING held commencement exercises on June 5. Elizabeth Fox gave the address. A reception followed the exercises. Many social functions preceded commencement exercises. THE CITY HOSPITAL ALUMNAE ASSOCIATION at its annual meeting in May elected the following officers: President, Bertha Boyles; vice-president, Myrtle Dowden; secretary, Esther Chamberlin; treasurer, Hope Fuller. The next meeting will be held on July 9. A senior student will give a paper on What We Expect of the Alumnae Association, and a paper will be given on What Other Alumnae Associations Are Doing. A class membership campaign will be organized and the class having one hundred per cent membership in May, 1922, will be the guests of the alumnae association at the annual banquet to be held in June of 1922. THE DEACONESSE HOSPITAL TRAINING SCHOOL FOR NURSES held commencement exercises for its graduating class on May 29. Rev. C. P. Maas gave the address. The Alumnae Association entertained the class at a dinner. Lebanon.—Following memorial services held by the Emmett Brown Post, a bronze American Legion marker was placed upon the grave of Grace Copeland by Florence J. Martin, Commander of the Berry-Copeland Post.

Iowa: Council Bluffs.—DISTRICT ASSOCIATION No. 9 held its regular meeting on June 11. Dr. E. T. Manning gave an address. A luncheon followed the meeting. THE MERCY HOSPITAL held commencement exercises on June 6. A reception followed the exercises. THE MERCY HOSPITAL ALUMNAE ASSOCIATION held a meeting on that date, and gave a luncheon for the graduating class at the Country Club. THE JENNIE EDMUNDSON MEMORIAL HOSPITAL ALUMNAE ASSOCIATION gave a dinner to the graduating class and to the faculty on June 1 at the Country Club. Cedar Rapids.—THE MERCY HOSPITAL held commencement exercises on May 28. Dr. L. D. Moorhead, Dean of the College of Medicine of Loyola University of Chicago, delivered the address. A banquet followed the exercises. THE MERCY HOSPITAL ALUMNAE ASSOCIATION held its regular meeting April 11 at the home of Catherine Welch. A luncheon and social hour followed the business meeting. On February 21 the alumnae members were guests of the sisters at a dinner party. The association entertained the graduating class at a banquet on May 27. A dance followed the banquet. Mary Burke, class of 1913, Mercy Hospital, has accepted a position as a surgical nurse at a hospital in Albuquerque, N. M. Dubuque.—THE FINLEY HOSPITAL TRAINING SCHOOL FOR NURSES held graduation exercises on May 27. Rev. John Dysort addressed the class. A reception followed the exercises. The class was entertained by the alumnae association on June 7 at a picnic. The Finley Hospital Alumnae Association held a dance on May 2 for the benefit of the association. Frieda Dehms, class of 1921, Finley Hospital, has accepted a position as office nurse for a local doctor. Fairfield.—THE JEFFERSON COUNTY HOSPITAL held commencement exercises on June 3, when six nurses graduated. Washington.—DISTRICT ASSOCIATION No. 2 met on June 4, and Dr. Caroline Hedger of Chicago gave a very interesting address.

Kansas.—THE KANSAS STATE NURSES' ASSOCIATION held its tenth annual meeting in Topeka on May 12, 13 and 14. The convention headquarters was at the National Hotel. Rt. Rev. James Wise, Bishop of Kansas, gave the invocation at the opening evening meeting. Governor Henry J. Allen delivered the address of welcome. His kindly wishes, sympathetic interpretation of the meaning of the

convention, and his words of welcome aroused a hearty applause from every one in attendance. W. Pearl Martin, President of the Kansas State Nurses' Association, voiced the sentiment of the organization in her response to the address of welcome. Sara E. Parsons, until recently superintendent of nurses of the Massachusetts General Hospital, gave a wonderful address on The Obligation of the Community to the Profession of Nursing. In her talk Miss Parsons emphasized the fact that the public and the nursing profession have problems in common and need to join forces to accomplish the task before us. The editor of the *Kansas State Medical Journal*, Dr. W. E. McVey, addressed the nurses on the subject of Educational Requirements for Student Nurses. Dr. McVey brought out the need for a standardized course of training for nurses and a common standard of qualification for registration of nurses. A paper on The Part the Nurses Should Play in Detection of Incipient Tuberculosis was given by Dr. E. L. Loveland, physician in charge of City Tuberculosis Sanitarium of Topeka. On Friday morning the Board of Directors met in Representative Hall. The meeting was opened by the President, W. Pearl Martin. A letter was read from Miss Sly, chairman of the Committee on Revision of the American Nurses' Association in which she advised that the American Nurses' Association draws no color line and that if a colored nurse meets the eligibility requirements of that association there is no reason why she should not be admitted to membership through her state association. The matter of an increase in dues to the American Nurses' Association was brought up and discussed. The matter was later brought before the members of the association and it was agreed upon to increase the membership fees in the state association from \$2.00 to \$2.50. Ways and means to cover expenses incurred by the legislative committee were discussed and it was agreed that each member be assessed \$1.00 to cover this expense. Mrs. C. C. Bailey, chairman of the Committee on Revision, reported that from a list of fifty-two accredited training schools for nurses thirty-three alumnae associations are organized or revised. The Legislative Committee reported through its chairman, Mrs. C. C. Bailey, on the bill providing for the registration of nurses which was recently passed in Kansas. Mrs. Bailey also made suggestions for further legislation regarding the registration of nurses. The Relief Fund Committee reported contributions amounting to \$96. July 27, the birthday of Linda Richards, was set as the time when contributions of one day's pay should be given to the Relief Fund. Sara E. Parsons reported on the work of the Legislative Committee in Missouri. Helen B. Thompson gave a very interesting paper on Food Therapy. The two past presidents, Mrs. Alma O'Keefe and Sister Catherine Voth, gave short addresses. The former gave a brief history of the organization and the latter spoke of the need for more thoroughness in our daily work and better coöperation among the members of the association. The Public Health and the Private Duty Sections held meetings on Saturday morning. Louise Kininger gave a paper on Fundamental Requirements of Successful Nursing. A paper on What Can Be Done to Maintain the Health of the Student Body was given by Grace Umberger and Ottillia Fox spoke on the Use of Radium. Resolutions were adopted expressing the appreciation of the members of the association for the very successful meeting. The following officers were elected: President, Alma R. O'Keefe, Wichita; first vice-president, Mrs. W. R. Saylor; second vice-president, Pearl Leptad; treasurer, Carolyn Barkmeyer; secretary, Sister Mary Helena, St. Barnabas Hospital, Salina; Board of Directors,—Elizabeth Condell, Mrs. Alma R. O'Keefe, Sister Mary Helena, W. Pearl Martin, Sister Catherine and Ethel Hastings. Mrs. C. C. Bailey is president of the Public Health Section

and Dorothy Jackson is chairman of the Private Duty Section. The text of the new law for the registration of nurses, which was signed by Governor Allen on March 14, 1921, is as follows:

Be it enacted by the Legislature of the State of Kansas:

SECTION 1. Section 10231 of the General Statutes of 1915 is hereby amended to read as follows: Sec. 10231. The members of said board shall meet at Topeka during the first week of July, 1921, and every second year thereafter, and shall elect a president, vice-president and a secretary-treasurer from their own number, each of whom shall hold his or her respective office for two years. Said board shall hold regular meetings in May and December of each year upon such dates and at such places as may be fixed by the board, and such other meetings as may, in the judgment of the board, be necessary. Examination of applicants for registration of nurses shall be held at such meetings, held in May and December, if there shall be applicants for such registration, and at other meetings if the board shall so order. Notice of all meetings for examination of nurses shall be published at least thirty days prior to the time of each meeting, in the official state paper. The board shall adopt rules and regulations, not inconsistent with this act, to govern its proceedings and to carry out this act, and such rules and regulations shall be published, upon promulgation, once in the official state paper, and shall also be published in separate form, and copies thereof shall be furnished upon application to persons needing to refer to the same. Said board shall have a seal, of which the secretary shall be the custodian. The secretary shall have the power and authority to administer oaths in transacting business of the board, and he or she shall keep a record of all the proceedings of the board, and a register of nurses who shall pass the examination of the board and showing the certificates of registration granted, or revoked, and such register shall be open at all reasonable times to public scrutiny. Three members shall constitute a quorum for the transaction of business. The secretary-treasurer shall give to the state treasurer a bond for the faithful discharge of his or her duties in the penal sum of one thousand dollars (\$1,000), with one or more sufficient sureties, to be approved by the governor.

SEC. 2. Section 10232 of the General Statutes of 1915 is hereby amended to read as follows: Sec. 10232. All persons to whom certificates of registration as nurses, under the law of this state, shall have been issued prior to the time this act shall take effect, shall be styled and known as registered nurses, and shall come within the provisions of this act and shall comply with the same, but shall not be required to undergo any new examination or obtain a new certificate of registration as a nurse. All other persons who shall desire to engage in the practice of professional nursing, shall legally qualify by securing a certificate of registration from the board of registration of nurses. Such applicants shall give satisfactory proof of being twenty-one years of age, of good moral character, and shall present a diploma from an accredited training school of nurses and pass the examination given by said board: *Provided*, The right of the applicant for examination or registration shall not be made to depend upon the size, location, number of beds or number of patients of the hospital in which said applicant has studied and worked. Any person who shall be otherwise qualified under the provisions of this act, and who shall have received a certificate of registration as a nurse under the laws of any other state, with which Kansas has conditional reciprocity upon the subject of admission to practice of nursing, which certificate shall contain a notation of recommendation to the board of registration of nurses

of this state, from the corresponding board of such other state, shall be granted a certificate of registration without examination, upon making a written application therefor, and presenting such certificate of registration from such other state, and paying the ten dollars (\$10) registration fee. Said certificate of registration from said other state shall be signed by the secretary or corresponding officer of the board issuing the same and stamped with the seal of said board.

SEC. 3. Section 10233 of the General Statutes of 1915 is hereby amended to read as follows: **Sec. 10233.** Every applicant for registration as nurse hereunder shall pay a fee of ten dollars (\$10) to the treasurer of said board upon filing an application. Upon receiving a certificate of registration the person to whom issued shall cause a copy thereof to be filed with the county clerk of the county in which such person resides, accompanied by an affidavit of his or her identity as the person to whom the same was issued and stating in such affidavit his or her place of residence at the time of examination. The county clerk shall charge fifty cents for registering such copy of certificate together with such affidavit. The nurse to whom such certificate of registration shall be issued shall show the same upon request at any time to said board or its secretary.

SEC. 4. Section 10234 of the General Statutes of 1915 is hereby amended to read as follows: **Sec. 10234.** It shall be the duty of the secretary of the said board to file with the secretary of state on or before the first days of the months of January, April, July and October in each year, a list of all certificates of registration issued or revoked by said board during the preceding quarterly period, with the names and residences of the persons to whom such certificates have been issued, or against whom they have been revoked. The members of said board shall receive a compensation of five dollars (\$5) per day, for each day actually and necessarily engaged in the performance of the duties of their office, and also the necessary expenses incurred by them in the performance of such duties. The secretary shall receive additional compensation at the rate of two hundred dollars (\$200) per annum, payable quarterly. The secretary-treasurer of the state board of examiners of nurses shall on or before the tenth day of each month remit to the state treasurer all fees collected by said board during the preceding month, and at the same time shall render to the auditor of state an itemized and verified report showing the source from which said fees were obtained. The state treasurer and auditor of state shall credit 10 per cent of all fees collected by said board and remitted as provided hereinbefore to the general revenue fund of the state. The remaining 90 per cent of the fees remitted by the above board shall be by the state treasurer and auditor of state placed in the special fee fund of the above board; the compensation of members and other actual and necessary expenses of the board to be paid therefrom. That 90 per cent of all fees collected by said board and required to be remitted to the state treasury under this section during the fiscal years ending June 30, 1921, June 30, 1922, and June 30, 1923, are hereby appropriated to the said board for the purposes specified in this act, and all such fees hereby appropriated and made available for the use of said board shall be paid by the state treasurer upon warrants drawn by the auditor of state upon duly itemized and verified vouchers signed and approved by the president and secretary-treasurer of said board, for the expenses of said board, in carrying out the provisions of this act, whether such expenses shall have been heretofore incurred or shall hereafter be incurred: *Provided, However,* That no such moneys shall be paid out of the funds of the state treasury upon the warrants issued by the state auditor to members of said board, until the qualifications of members of said board are

approved by the governor: *Provided further*, That all unexpended balances of the fees in the above fee funds at the close of the fiscal years ending June 30, 1921, and June 30, 1922, are hereby reappropriated and made available for the next succeeding fiscal year.

SEC. 5. An accredited training school for nurses within the meaning of this act is defined to be one connected with a hospital requiring the persons who shall have begun to receive training as nurses thereat prior to the time this act shall take effect to have a common-school education or its equivalent, and persons who shall begin to receive training thereat after the time this act shall take effect to have at least one year of high school education or its equivalent and having one registered nurse employed at the hospital: *Provided*, That if such registered nurse shall leave without fifteen days' notice the hospital management shall be allowed a reasonable time to fill vacancy, and giving a continuous theoretical and practical course in bedside nursing of not less than two years and six months. Such training shall include at least three hundred and fifty hours of theoretical instruction. Practical bedside nursing shall include the care of medical and surgical patients, male and female, obstetrical patients and children. The applicant shall receive a substantial course of training in each of said branches of bedside nursing. Where an applicant has had a course of training in such a hospital which gives training to nurses in one or more less than all of said branches of theoretical or bedside nursing, but otherwise complies with the terms of this act, the applicant shall receive the remainder of the training herein prescribed at some hospital fully complying with the terms of this act. Any hospital giving training which shall receive credit under this act, shall maintain accurate and current records showing in full the theoretical and practical courses of instruction given to each student in such hospital. All such hospitals shall maintain healthful and comfortable living conditions for the students thereat. Any hospital desiring to have its school of nursing inspected and accredited by said board shall file an application with said board therefor, and shall pay to the treasurer of said board a fee of ten dollars (\$10) upon filing such application, and the same sum annually thereafter on or before the 30th day of June, as long as said hospital shall desire to have its nursing school accredited by said board.

SEC. 6. Original sections 10231, 10232, 10233, 10234 and 10235, inclusive, of the General Statutes of 1915 are hereby repealed.

SEC. 7. This act shall take effect and be in force from and after its publication in the statute book.

THE KANSAS STATE ORGANIZATION FOR PUBLIC HEALTH NURSING held a meeting with the Kansas State Nurses' Association for three days recently and adopted the JOURNAL as its official organ. **Wichita.**—**DISTRICT ASSOCIATION No. 1** has the following officers: President, Mrs. Charles C. Bailey; first vice-president, Florence Bair; second vice-president, Edith Z. White; secretary, Esther Sullivan; treasurer, Mrs. Demaris A. Payton.

Kentucky: Lexington.—**THE GOOD SAMARITAN SCHOOL OF NURSING** held graduating exercises on June 2 at the Central Christian Church. Thirteen students were graduated.

Massachusetts: Boston.—**THE BOSTON CITY HOSPITAL TRAINING SCHOOL FOR NURSES** held graduation exercises May 27. Twenty-eight pupils received diplomas. Mary M. Riddle addressed the graduates. **THE BOSTON CITY HOSPITAL ALUMNAE ASSOCIATION** recently held its annual meeting. Miss Mary M. Riddle was re-elected president of the alumnae association. A social hour followed the

meeting. THE MASSACHUSETTS HOMOEOPATHIC HOSPITAL ALUMNAE ASSOCIATION held its annual business meeting on June 6. THE BOSTON STATE HOSPITAL held graduating exercises on June 16, when seventeen students received diplomas. The address was given by Dr. C. M. Campbell, Professor of Psychiatry, Harvard Medical School, and Director of the Boston Psychopathic Hospital. THE CHILDREN'S HOSPITAL held graduating exercises on June 2. Cambridge.—THE CAMBRIDGE HOSPITAL ALUMNAE ASSOCIATION entertained the Middlesex County Nurses at Cambridge Hospital on April 16. A social hour and refreshments followed the meeting. THE CAMBRIDGE HOSPITAL ALUMNAE ASSOCIATION held its annual dinner at the Twentieth Century Club, Boston, recently. The guests of honor were Esther Dart, President of the Massachusetts State Nurses' Association; Bernice Billings, formerly Red Cross Division Director, and Josephine Thurlow, Superintendent of the Cambridge Hospital. A social hour followed the meeting. Charlestown.—A party of Boston nurses recently visited the grave of the first woman of the nursing profession to settle in New England. Lynn.—THE LYNN HOSPITAL held graduation exercises on May 26, when nine nurses received diplomas. Tewksbury.—THE MASSACHUSETTS STATE INFIRMARY ALUMNAE ASSOCIATION held its May meeting at the nurses' home, at which twenty-seven members were present. Mrs. Helen Kellar was appointed Councillor for the coming year.

Michigan.—MICHIGAN STATE NURSES' ASSOCIATION held its seventeenth annual convention in Flint, May 3-7. Three hundred nurses and visitors attended and it was a most enthusiastic meeting. Elizabeth Fox, of Washington, D. C., Helen F. Greaney of Philadelphia, Pa., and Mary C. Wheeler of Chicago, Ill., were speakers, as were several state people of note: Mrs. L. E. Priddy, Dean of Woman's State Normal College; Mary Sweeney, Dean of Domestic Science in the Michigan College of Agriculture, and Major Duff, private secretary to Governor Grosbeck. The following officers were elected: President, Anna M. Schill, Hurley Hospital, Flint; first vice-president, Mrs. Elizabeth Vaughan; second vice-president, Minnie Paynter; recording secretary, Flora M. Burgdorf, Flint; corresponding secretary, Elba L. Morse, Sandusky; and treasurer, Lulu B. Durkee; councillors, Mrs. L. E. Gréttor and Sarah E. Sly. Detroit.—The graduating class of The Grace Hospital was entertained on May 11 at a reception in the nurses' home. THE WOMAN'S HOSPITAL ALUMNAE ASSOCIATION entertained the 1921 graduating class at a theater party and dinner on May 6. On May 5 the class was also entertained by the juniors and intermediates. Elba L. Morse, Red Cross Public Health Nurse for Sanilac County, has been recruiting nurses by conducting Mother and Daughter banquets. Addresses, playettes and tableaux were given in which high school girls have taken part. A registration was conducted and literature was sent to all the young women registered.

Minnesota: Minneapolis.—DISTRICT ASSOCIATION No. 2 held its annual meeting on May 5. An interesting report of the League Convention recently held in Kansas City was given. Miss Rankiellour spoke on the proposed new bill for nurses in Minnesota. The following officers were elected: President, Frances Cameron; vice-president, Clara Norvak; secretary-treasurer, Mary O'Connell; corresponding secretary, Dulcie Kinsello. A social hour followed the meeting.

Missouri: St. Louis.—THE ST. JOHN'S HOSPITAL ALUMNAE ASSOCIATION gave a banquet for the 1921 graduating class, recently. This class, composed of nineteen members, is the largest ever graduated from the hospital. Mary R. Dorais, class of 1917, St. John's Hospital, is taking a course in anaesthesia at St. Joseph's Hospital, Chicago, Ill.

Nebraska: Omaha.—DISTRICT ASSOCIATION No. 2 held a meeting on May 20 at the Hotel Castle. Following the reports of the officers and of the committees, a special session was held for the 1921 classes of the district. The graduates were welcomed to the various fields of nursing and to the associations by Laura Skovlin, Florence McCabe, Blanche Fuller and Lulu Abbott. THE NEBRASKA METHODIST EPISCOPAL HOSPITAL held graduation exercises on May 26, when twenty-seven pupils were graduated. The address was given by Rev. J. W. Kirkpatrick. THE FORD HOSPITAL TRAINING SCHOOL FOR NURSES held graduation exercises recently, when a class of five was graduated.

New Hampshire: Claremont.—THE CLAREMONT GENERAL HOSPITAL ALUMNAE ASSOCIATION recently held its annual meeting, when the following officers were elected: President, Edna A. Prunier; vice-president, Marjorie Perkins Fraser; secretary, M. Gladys Larrabee; treasurer, Mrs. Clara Harvey Rice.

New Jersey: Elizabeth.—THE ELIZABETH GENERAL HOSPITAL held commencement exercises on May 17, when fifteen nurses received diplomas. Hon. William N. Runyon of Plainfield was the speaker. THE ELIZABETH GENERAL HOSPITAL ALUMNAE ASSOCIATION entertained the 1921 class with a musicale on May 10. **Paterson.**—THE PATERSON GENERAL HOSPITAL ALUMNAE ASSOCIATION held its annual meeting on June 7. The association entertained the class of 1921 on May 19 with a dance.

New York.—THE RELIEF FUND COMMITTEE reports that the drive to commemorate the birthday anniversary of Sophia F. Palmer is going on successfully. Sixteen nurses are now being aided, and five applications are being acted upon. The need for more funds is growing rapidly. **Buffalo.**—DISTRICT ASSOCIATION No. 1 held its annual meeting on May 18, when, after the reports were read, the following officers were elected: President, Mrs. A. L. Hansen; first vice-president, Rose Nagel; second vice-president, Mrs. Ingersoll; secretary, Miss Sinsbox; treasurer, M. Daly; directors, A. Hooty and Miss Powers. After the business meeting a musical programme was enjoyed. The June meeting was held on the fifteenth, in the Y. W. C. A. building in Niagara Falls. THE BUFFALO HOSPITAL OF THE SISTERS OF CHARITY held graduating exercises on May 19, for twenty-two graduates. The presentation of diplomas was made by Rt. Rev. William Turner, Bishop of Buffalo. **Rochester.**—THE GENESEE VALLEY NURSES' ASSOCIATION held its annual meeting on May 31, following the reports of officers and committees. The following officers were elected for the ensuing year: President, Eunice A. Smith; first vice-president, Elizabeth Copeland; second vice-president, Mrs. Anna Polley; secretary, Edna W. Gorton; treasurer, Mary Keefe; Directors, 1921-24, Mary Morris, Elin K. Kramer. THE HAHNEMANN, THE ROCHESTER GENERAL, AND THE ROCHESTER HOMEOPATHIC HOSPITALS held joint commencement exercises on May 31, in the Chamber of Commerce for seventy graduates of their Schools of Nursing. The address was given by Dr. Christopher G. Parnall, Medical Superintendent and Director of University Hospital, Ann Arbor, Mich. THE ROCHESTER GENERAL HOSPITAL ALUMNAE ASSOCIATION entertained the graduating class at a banquet on May 25. Class day exercises were held on May 31. A series of entertainments was given for the graduating class. THE ROCHESTER STATE HOSPITAL SCHOOL OF NURSING held graduating exercises on June 13, when eight students received diplomas. The address was given by Rev. C. Waldo Cherry. **Canandaigua.**—THE FREDERICK FERRIS THOMPSON HOSPITAL ALUMNAE ASSOCIATION held its annual meeting on May 26, and elected the following officers: President, Orene Gourlay; vice-president, Lillian Fried; secretary, Ruth Scribner; treasurer, Nettie LeFevre;

Directors, Misses Stokes, Goshline, Melvin, Stock. Graduation exercises were held on this date, when ten students received diplomas. The address was delivered by Harriet Gillett. The graduating class was entertained by the alumnae association at a banquet on May 25, by the intermediates at a picnic on May 24, and by the juniors at a banquet on May 20. Clifton Springs.—THE CLIFTON SPRINGS SANITARIUM, held commencement exercises on June 16, when seventeen students received diplomas. The address was given by Adda Eldredge. A reception followed the exercises. Rome.—THE ROME HOSPITAL TRAINING SCHOOL FOR NURSES held graduation exercises on May 28. Dr. A. Martine gave the address. A reception and dance followed the exercises. During commencement week the class was entertained at dinners by the alumnae association and by the hospital, and at a picnic given by the juniors which was followed by a dance. Troy.—THE TROY HOSPITAL ALUMNAE ASSOCIATION recently held a business meeting at which the following officers were elected: President, Mary Carrigan; first vice-president, Clara Purcell; second vice-president, Josephine Head; secretary, Nina Martin; treasurer, Helen Burke. At the May meeting of the association the twelve-hour day was voted upon and accepted. Graduation exercises were held on May 24. Twenty-three nurses graduated. White Plains.—THE WHITE PLAINS HOSPITAL held graduating exercises May 6, when four students received diplomas. A social evening followed the exercises. THE WHITE PLAINS HOSPITAL ALUMNAE ASSOCIATION held its annual meeting on May 10, when the following officers were elected: President, Mrs. F. C. Parry; vice-president, Jean Ormiston; secretary, Mrs. Beth McVicar; treasurer, Mrs. Anna Romer; Board of Trustees: Ada Meehan, Nan Wharton, and Gertrude Trefry. The association entertained the girls of the senior class of the high school, the "Unity Club," and the "You Come Club" on May 12, at the nurses' home, with a musical programme. Eleanor Duffield, Superintendent of the hospital, gave a short address of welcome, and Florence Johnson, of the Atlantic Division of the American Red Cross, gave an interesting talk. Following the programme refreshments were served and the visitors were shown through the nurses' home and the hospital. There were about eighty guests and it is felt that their interest in the nursing profession has been aroused. New York City.—THE METROPOLITAN HOSPITAL SCHOOL OF NURSING held graduating exercises on May 26, when nineteen nurses received diplomas. Mrs. Richard Chapman, Dr. Sprague Carleton and Hon. Edward J. McGoldrick gave addresses. A reception and dance followed the exercises. THE COMMUNITY HOSPITAL held graduating exercises on May 25. Miss E. Boswell gave the address. THE ALUMNI ASSOCIATION OF THE MANHATTAN STATE HOSPITAL, WARD'S ISLAND, recently rendered a reception to Harriet Bailey, former Directress of the Training School, on her return from her work abroad in the interests of the Red Cross. Miss Bailey gave an interesting account of some of her activities abroad. THE PRESBYTERIAN HOSPITAL TRAINING SCHOOL held graduating exercises on May 19. The graduating class was entertained at luncheon by the alumnae association on May 20. THE ALUMNAE ASSOCIATION OF THE METROPOLITAN HOSPITAL SCHOOL OF NURSING held its annual meeting in the Central Club, on May 10, when the following officers were elected: President, E. Beatrice Christie; vice-president, Margaret Kelly; recording secretary, Isabel Welsh; corresponding secretary, Lillian Henderson; treasurer, Christine Schaefer; directors for three years, Agnes S. Ward and Ella A. Laurence. Ohio.—THE OHIO STATE NURSES' ASSOCIATION met jointly with THE OHIO HOSPITAL ASSOCIATION in Cleveland on May 16-20, at the Hotel Winton. The first two days were devoted entirely to the Hospital Association. On Wednesday

a joint session was held, the subject being The Necessity for Co-related Effort in Hospital Administration, which was presented by Dr. Backmeyer, Superintendent of the Cincinnati General Hospital. This subject was discussed both from the standpoint of the principal and the superintendent. In the afternoon, a question box opened a very interesting discussion. At the general evening session the address of welcome was given by Belle Sherwin, President of the League of Women Voters. The relation of a Nursing School to the Hospital was presented by Mrs. John H. Lowman. The relation of the Nurse to the Public was given by Dr. Cutler, Dean of Western Reserve University. The subject, The Relation of Nursing to Medical Profession, was very ably discussed by Dr. Haven Emerson. Thursday morning the meeting was under the auspices of the Section on Education. The programme for the Private Duty Section in the afternoon was as follows: Private Duty Nursing from the Physician's Point of View, by Dr. Alice Butler; Investments for Nurses, by Miss Scott. Tea at the Nursing Center was followed by an automobile ride. Friday's session was devoted to the League of Nursing Education and Public Health Nursing. There were about 450 members registered at the Convention and the meetings were filled with interest and lively discussions. Miss Laura Logan was re-elected President of the Ohio State Nurses' Association, and Miss Clarabel Wheeler as President of the State League of Nursing Education. An Institute for Instructors was held in Dayton at the Miami Valley Hospital, beginning June 29. Cincinnati.—THE CHRIST HOSPITAL SCHOOL OF NURSING held commencement exercises on May 28, when twenty-four nurses received diplomas. A class of twenty was graduated in February. THE CHRIST HOSPITAL SCHOOL OF NURSING ALUMNAE ASSOCIATION held a meeting on May 27, and the following officers were elected: President, Nellie I. Young; vice-president, Leona Connor; secretary, Louise Schroeder; treasurer, Bertha Gaebel. The graduating class was admitted to the association at this meeting, and a banquet followed the meeting. Elsie Mitchell, class of 1920, Christ Hospital, left in May for Egypt, where she will engage in hospital work. Susan Meyer, class of 1921, Christ Hospital, will go to Bat Cave, N. C., where she will act as nurse for a Community Center. Jessie Meyers, class of 1917, Christ Hospital, has accepted a position as nurse in the Miami University, Oxford, Ohio. THE ALUMNAE ASSOCIATION OF THE SCHOOL OF NURSING AND HEALTH, CINCINNATI UNIVERSITY, gave a banquet for the members of the 1921 class, on May 25. Former classes were well represented, and Miss Petering, the oldest graduate present, was an inspiring example to the younger guests. A dance followed the banquet. Cleveland.—ST. JOHN'S HOSPITAL recently held commencement exercises when eighteen nurses received diplomas. The hospital recently opened the new recreation hall for the nurses with an entertainment followed by a dance. Members of the alumnae association and of the different classes of student nurses took part in this entertainment. ST. JOHN'S HOSPITAL ALUMNAE ASSOCIATION enjoyed a delightful picnic, recently, after which a dance was held in the recreation hall. Hamilton.—DISTRICT ASSOCIATION No. 8 met at the Mercy Hospital, on May 23. A musical programme was enjoyed, after which the reports from the local organizations and committees were presented. Margaret Fagan gave an interesting report of the meeting of the Ohio State Nurses' Association, which was held in Cleveland in May. THE SCHOOL OF NURSING OF THE MERCY HOSPITAL has been presented with a yearly scholarship of \$500.00 by Mr. and Mrs. Homer Gard in memory of Mrs. Gard's mother, Mrs. Anna M. J. Matthias. This scholarship will be known as the Matthias Scholarship and will be awarded each year to a successful student so that she may make herself pro-

ficient in some special line of nursing work. The graduate nurses of the Mercy Hospital held a May party on May 6. The money realized from this party is to be used to furnish two rooms in the nurses' new home.

Oregon: Portland.—THE UNIVERSITY OF OREGON is offering a special course in advanced public health work. The course is directed by Elnora E. Thomson. THE UNIVERSITY OF OREGON, DEPARTMENT OF PUBLIC HEALTH NURSING, arranged to have nine of its students spend from March 21 to April 9 in rural work with county nurses. Julia D. Clock, class of 1904, Metropolitan Hospital, New York City, has accepted the position of county public health nurse for Deschutes County. Ebba M. Djupe, who has accepted an appointment on the Oregon Tuberculosis Association Staff, is giving public health nursing demonstrations in various counties. Marie Falldine, Jackson County nurse, has been appointed to the Physical Education Committee of the Oregon State Teachers' Association. Mrs. Mary E. Bonnalie, class of 1921, Sellwood General Hospital, Portland, has taken charge of the Lumberman's Hospital, Bend, Ore. V. Catherine Talty, former superintendent of nurses, Sellwood General Hospital, Portland, has accepted a position as nurse for the National Hospital Association. Bessie B. Úreu, class of 1921, Sellwood General Hospital, has accepted the position of superintendent of nurses of the Sellwood General Hospital. Mrs. Florence May Wilcox, class of 1921, has accepted a position as head surgical nurse at the hospital. Grace Holmes is making a tuberculosis survey in Portland for the Oregon Tuberculosis Association. Mary P. Billmeyer, a graduate of the Presbyterian Hospital, Chicago, Ill., succeeds Mrs. Ruth Young Gould, who recently resigned as county health nurse for Multnomah County. Charlotte Walker has been appointed to the position of health nurse in Washington County.

Pennsylvania: Philadelphia.—GRADUATES OF THE PHILADELPHIA GENERAL HOSPITAL held a reunion on April 27-29. Members of the class of 1921 were guests of honor at the banquet given on April 27. There were representatives from each class present. Thursday was given over to visiting the hospital. Dr. Stoner gave a lecture on Basal Metabolism. Miss McCrea gave demonstrations in the diet kitchen on Friday, and Miss Clayton announced a plan whereby post-graduate work is to be given nurses who desire to take a summer course. In the afternoon the graduates enjoyed a trip to the Philadelphia Hospital for Contagious Diseases. Following an inspection of the hospital, a demonstration and lecture were given by Miss Miller. It is hoped that the reunion may be held each year. THE CHILDREN'S HOMOEOPATHIC HOSPITAL ALUMNAE ASSOCIATION held its regular meeting on May 16. A reception was given for the graduating class on May 27 and friends of the graduating class gave a play. Germantown.—THE GERMANTOWN HOSPITAL AND DISPENSARY ALUMNAE ASSOCIATION gave a reception to the graduating class on May 18 at the nurses' home. Corry.—DISTRICT ASSOCIATION No. 8 held its second quarterly meeting on May 18. A report of the directors' meeting was given by Mrs. Amy McLaren, who urged support of the Legislative and Relief Funds. Miss Miller and Miss Hodges read interesting papers on the subjects of Massage, Hydrotherapy and X-ray. The next meeting will be held in Oil City on September 21. THE METHODIST EPISCOPAL ALUMNAE ASSOCIATION held its annual meeting and banquet on May 26. All committees reported a progressive year and the following officers were elected: President, Margaret E. Fowler; first vice-president, Carrie V. Newhouser; second vice-president, Gertrude Hinkle; third vice-president, Beulah Armons; recording secretary, Mrs. Frances H. Reiff; corresponding secretary, Elizabeth E. Creek; treasurer, Elizabeth V. Kirby; director, Stella Mummert. The members of the

1921 class were guests at the banquet which followed this meeting. In the evening graduation exercises were held, when eleven nurses received diplomas. Dr. Levi Hammond addressed the class. The alumnae association also held a business meeting on June 14. THE NURSES' CLUB OF PHILADELPHIA COUNTY held its sixteenth annual meeting on June 2, when the following officers were elected: President, Ellen A. Gill; secretary, Helen F. Greaney; treasurer, Rebecca Jackson. Braddock.—THE BRADDOCK GENERAL HOSPITAL NURSES' ALUMNAE ASSOCIATION will hold its meetings monthly hereafter. Philadelphia.—MT. SINAI TRAINING SCHOOL held graduating exercises on June 15, when seven nurses received diplomas. The alumnae association gave an entertainment prior to the exercises. THE MT. SINAI HOSPITAL NURSES' ALUMNAE ASSOCIATION held a special meeting on May 12, when the reports of the officers and committees were read and accepted. Twenty-five dollars was contributed to the Relief Fund, and one hundred dollars was given toward an endowment of a room for the alumnae association. A linen shower was given by the alumnae association to Edith H. Schaftz on May 5. Mabel F. Grady, superintendent of Mt. Sinai Hospital Training School, gives lectures on nursing administration to the graduate nurses, and round tables every second Wednesday of the month. ST. LUKE'S HOSPITAL ALUMNAE ASSOCIATION held its annual election recently and the following officers were elected: President, Elizabeth R. Burns; vice-president, Maude Fleck; corresponding secretary, Bella M. Davis; recording secretary, Christine Zieyler. A special meeting was also held when Helen Greaney gave a very interesting talk to members of the senior class, urging their prompt and coöperative membership on graduation. THE WOMEN'S HOSPITAL held graduating exercises for nine students on May 25. Three members of the class were awarded medals. Class day exercises were held on May 24. The new roof garden was opened on May 28, when a dance was held by Mrs. George H. Earle, Jr. Pittsburgh.—THE ALLEGHENY CENTRAL DIRECTORY held its regular meeting on May 24, when plans were discussed for a bazaar to be held in the fall to raise money for a new nurses' club house. THE PITTSBURGH HOSPITAL TRAINING SCHOOL FOR NURSES held graduation exercises for a class of nineteen on May 25. A dinner was given by the alumnae association on the same evening. THE PITTSBURGH HOSPITAL ALUMNAE ASSOCIATION held the fifth of their series of dances, for an endowment for a room, on May 25. THE ST. JOHN'S GENERAL HOSPITAL TRAINING SCHOOL FOR NURSES' ALUMNAE ASSOCIATION gave a banquet to the members of the 1921 graduating class on the roof garden of the Hotel Chatham, on April 2. Graduation exercises were held on May 9, when eleven pupils received diplomas. THE ALLEGHENY GENERAL HOSPITAL SCHOOL FOR NURSES held graduation exercises on May 26 for a class of twenty students.

Rhode Island: Providence.—At a meeting held on May 15 in honor of the 101st anniversary of the birth of Florence Nightingale, an earnest plea was directed to the young women of the community that they give due consideration to the profession of nursing when they are choosing their life's work on the completion of their education. The speakers were: Lieutenant Governor Harold J. Gross; Mayor Joseph H. Gainer; Clara D. Noyes, Director, Department of Nursing, American Red Cross; Adda Eldredge, member of New York State Board of Nurse Examiners, and William P. Sheffield, Jr., Commander of the American Legion. Miss Eldredge brought to the attention of the audience the fact that the shortage of nurses is a community problem and not simply a problem for nurses to solve. Miss Noyes spoke of the educational needs of the profession and brought out the fact that not a single school of nursing in the

country is endowed. The meeting was attended by graduate and student nurses in uniform; by members of the American Legion, and by a large number of lay people. Music was furnished by the American Legion band.

South Carolina.—THE SOUTH CAROLINA STATE NURSES' ASSOCIATION held its annual meeting on April 18, 19 and 20. There was an attendance of over one hundred. Interesting papers were read by Dr. William Weston on The Social Relationship of the Nurse to the Community, and by Dr. Ernest Cooper on Tuberculosis and the Public Health. The Public Health Section was presided over by Mrs. Ruth Dodd, who is head of the Bureau of Child Hygiene. The nurses gave ten-minute talks dealing with different phases of public health nursing. In an open session of THE STATE MEDICAL ASSOCIATION, which held its meeting at the same time, Dr. Frank Lander read a paper on The Spirit of Nursing. The meeting was thrown open for discussion. M. E. McKenna, chairman of the Council on Nursing Education, led this discussion. THE STATE NURSES' ASSOCIATION was invited by THE STATE MEDICAL ASSOCIATION to meet with them in a joint public health meeting, which is the first time in the state that such an invitation has been issued. This joint meeting was addressed by Virginia Gibbes, of the Southern Division of the American Red Cross. The following officers were elected for the year: President, Jane Fraser; first vice-president, Mae Happoldt; second vice-president, Psyche Webster; secretary, Laura Blackburn; treasurer, Frances Stricker; councillors, M. E. McKenna, Frances C. Oogan, Mrs. E. B. Dabbs. **Columbia.**—THE COLUMBIA HOSPITAL SCHOOL FOR NURSES held graduating exercises on June 1. The exercises were unusual and particularly interesting, as they took the form of tableaux representing the various stages in the progress of nursing. A reception and dance followed the exercises. Nine students were graduated. Dr. Julius H. Taylor gave the address. The Columbia Hospital Alumnae Association recently entertained the graduating class at a dinner.

Texas.—THE TEXAS STATE NURSES' ASSOCIATION held its fourteenth annual convention in Galveston, on May 3, 4, 5, 1921, with more than one hundred and thirty nurses in attendance. A welcoming address was given by Dr. H. O. Sappington, mayor of the city. Dr. Marvin Lee Graves gave an address on Our Profession. The President, E. L. Briant, followed with a very splendid address of appreciation and encouragement. The adoption of a new constitution was voted upon, and unanimously accepted. There was some discussion in regard to the districting of the state, but very little criticism, and after making a few changes, owing to railroad facilities from one county to another, it was decided to leave the eleven districts as they are. Mabel Adams, Assistant Superintendent of the Federal Health Service, gave a most interesting talk on her work. A very interesting paper, prepared and sent in by Sarah McIntyre, who is doing missionary work among the Navajo Indians in New Mexico, was read by A. Louise Dietrich, secretary of the state association. A generous purse was made up among the nurses to be sent to Miss McIntyre for her work. Then the following papers were read to the assembly for discussion: X-ray, as a Part of a Nurse's Training, by Mary Grigsby; Ideals of Life and Death, by Dixie King; Industrial Nursing, by May Phillips; and Efficiency, by Pearl Caraway. The evening session was devoted to the private duty section, and the following papers were presented: Obstetrics in the Home, by Mrs. Sedgwick; Why Nurses do not Like to Nurse in the Home, by Mrs. P. K. Strellitz; How Can a Nurse Best Obtain Cooperation of the Family, by K. Yeager; Private Duty and Its Opportunity, by Sophie Ganzelt; The Private Duty Nurse, by Mary McGinnis. Wednesday

was given over entirely to the League of Nursing Education. The report of the meeting of the National League of Nursing Education held at Kansas City, Mo., was given by Miss Reed. After some discussion a committee was appointed to investigate the possibility of establishing a school for instructors during the summer. Miss Morgan gave a paper on Nurse Education. A paper by Mrs. Burnett entitled *Shall We Progress?* was read by Miss White, when the following questions were thoroughly discussed at a round table: How to interest young women to take up nursing in the training schools in West Texas; Is there any way to arouse and hold the interest of nurses in their patients?; How to get graduate nurses to care for tubercular patients in the state tuberculosis sanitarium. The day ended with a delightful sail down the bay which was greatly enjoyed by all present. Jane Duffy of the Public Health Department of the University of Texas, presided over the public health nursing section, which was held on Thursday morning. Two splendid papers, *Rural Public Health Nursing*, by Miss Baertsch, and *Health Supervision in Schools*, by Miss Bush, were read. A round table discussion on public health questions occupied the remainder of the morning. The final session was held on May 5 and two papers, *The Cheerful Side of Nursing*, by Mrs. Wright, and *The Advantages to the Graduate Nurse of Belonging to the Graduate Nurses' Association and Their Duties to the Same*, by Mrs. Barry, were read and discussed. These were followed by a discussion on the nurses' registry and reports from the various districts were given. The following officers were elected for the coming year: President, Helen Holliday, Baylor Hospital, Dallas; first vice-president, Mary Grigsby, Waco; second vice-president, Alma Walker, Fort Arthur; third vice-president, Jane Duffy, Austin; secretary-treasurer, A. Louise Dietrich, El Paso; directors, Mrs. Grace Engblad, E. L. Briant, Ethel Clay, Arline McDonald. The 1922 convention will be held in Fort Worth. A delightful banquet was given the members by the nurses of Galveston. THE STATE BOARD OF NURSE EXAMINERS held examinations in San Antonio, El Paso, Dallas, Paris, Temple, Austin and Galveston, June 3-4. The Board met in San Antonio July 2 to pass upon certificates.

Vermont.—THE VERMONT STATE NURSES' ASSOCIATION held its annual meeting on May 17 and 18 at the Mary Fletcher Hospital, Burlington. The membership committee reported that all eligible alumnae associations had joined the state association as corporate members. Sixty-five individual members were added through the year which makes a total membership of 212. Anastasia Corry reported for the Committee on Recruiting Pupil Nurses. The Vermont League of Nursing Education was re-organized and Helen Wood, superintendent of the Proctor Hospital, was elected president. Hazel Barry was elected secretary-treasurer. A Public Health Section was organized with Hattie E. Douglass as chairman and Faustina Maher as secretary. Twelve hour duty was discussed. Anastasia Corry was appointed state chairman of the Committee on Recruiting Pupil Nurses. The following officers were elected: President, Elizabeth P. Van Patten, Burlington; vice-president, Mrs. Charles H. Tuttle, Rutland; secretary, Mrs. Rose A. Lawler, Springfield; treasurer, Katherine Kingsley; directors for two years, Helen Little and Mabel Ware.

Virginia.—THE VIRGINIA STATE NURSES' ASSOCIATION and THE VIRGINIA STATE LEAGUE OF NURSING EDUCATION held a joint meeting in Danville on May 27. In the League meetings the education of the nurse was discussed from various angles. Dr. J. Allison Hodges represented the views of many physicians who believe that the shortage of nurses can be relieved by shortening the period of training. The trend of opinion, as expressed by papers presented by the President,

Rose Z. VanVort, Agnes Randolph, Celia Brian, Ethel Smith, Nannie J. Minor, Martha Baylor and others, was to the effect that the ideal to work for was the establishment of central or endowed training schools and that until this condition could be brought about that it would not be wise to reduce the period of training. The officers elected for the ensuing year are as follows: President, Rose Zimmermann Van Vort, Stuart Circle Hospital, Richmond, Va.; vice-president, L. L. Odum, Sarah Leigh Hospital, Norfolk, Va.; secretary, Martha V. Baylor, St. Luke's Hospital, Richmond, Va.; treasurer, Florence A. Bishop, King's Daughters' Hospital, Portsmouth, Va.; Executive Committee, Nannie J. Minor, Ethel M. Smith and Margaret Cowling.

Washington.—THE WASHINGTON STATE GRADUATE NURSES' ASSOCIATION held its sixteenth annual meeting, May 5-6, in conjunction with the Washington State Association of Public Health Nurses' meeting, on May 7, at the W. C. T. U. rooms in Wenatchee. Addresses of welcome were made by Mayor Clifford E. Chase in behalf of the city; E. A. Gerhardt, M.D., in behalf of the Chelan County Medical Society; and Mrs. Theo L. George, R.N., Wenatchee, member of the Seventh District. Response was made by Mae S. Loomis, Seattle. The state's seven districts were well represented as well as the new eighth (Gray's Harbor County) district, which was unanimously voted in with twenty active members. In the president's address the fact was emphasized that this is an age of specialization and that to be successful today we must know everything about some one thing and something about everything. Adda Knox of Bellingham related some of her experiences as a nurse in Alaska. Alma Swanson, Spokane, read a paper on Juvenile Court work in that city. Evelyn Hall, Seattle, talked on Hospital and Training School Administration. She spoke of the kind of woman wanted in the nursing profession and the responsibility of the graduate nurse in securing recruits for the profession. Mildred Lenoir, Tacoma, read a paper on Recruiting Pupil Nurses, which was discussed by Mrs. E. S. Soule, Alice M. Claude, Evelyn Hall and Mrs. Ethel Bartow. Dr. Thomas H. Grosvenor, Wenatchee, talked on "Schools" of Healing. He told of the various cults and schools of healing and their methods. He explained that scientific medicine seeks to find out the cause of the trouble that is afflicting the patient and after it, seeks to remedy the cause; also it takes the remedy where it finds it, while the schools of healing are bound by dogma if they are honest in their practices. Frances Havelo, director of Personal Service, Bon Marche, Seattle, gave a talk on Clothing for the Business and Professional Woman, accompanying her talk with a style show. Wellington Pegg, principal of the Wenatchee High School, gave a forceful address on Educational Standards, which is to be published in THE JOURNAL. Mrs. Annie Green read a paper prepared by Jeanette Downey, Seattle, on the Twelve Hour Duty for the Private Nurse. Leora Worthington, Spokane, spoke on the Nurse Anaesthetist, and Elna Rood, Red Cross Headquarters, Seattle, talked about The Malnourished Child. For entertainment, the Chamber of Commerce of Wenatchee took the guests in autos through the beautiful valley of apple blossoms, later having a picnic supper provided by the Chelan County Tuberculosis League, Harmony Club and Sunshine Circle. The second evening the nurses were tendered a banquet by the nurses of the Seventh District, when Mae S. Loomis acted as toastmistress and called on the state's ex-presidents for responses, also on Mrs. Etta B. Cummings, state treasurer since its organization. The following officers were elected: President, Mrs. M. W. McKinney, Seattle; vice-presidents, Mrs. Jeante Sigerson, Wenatchee; Margaret M. Cassidy, Yakima; secretary, Katherine Major, King County Hospital, Seattle; treasurer, Mrs. Etta

B. Cummings, Tacoma. Directors, Adda Knox, Bellingham; Mrs. Blackstone, Seattle; Leora Worthington, Spokane.

Wisconsin: Fen du Lac.—THE ST. AGNES HOSPITAL SCHOOL OF NURSING held graduation exercises in the New Garrick Theater, on June 2, when a class of thirteen students received diplomas. Dr. F. S. Wiley gave the address and presented the diplomas.

BIRTHS

On May 18, a son, to Mr. and Mrs. Edward G. Sherwood. Mrs. Sherwood was Marguerite Millington, class of 1919, Methodist Episcopal Hospital, Brooklyn, N. Y.

On May 29, a daughter, to Mr. and Mrs. Clarence J. Larsen. Mrs. Larsen was Hazel Cutler, class of 1918, Methodist Episcopal Hospital, Brooklyn, N. Y.

On May 22, a daughter, to Dr. and Mrs. Harvey Latson. Mrs. Latson was Rose Richy, class of 1918, St. Joseph's Infirmary, Fort Worth, Texas.

On April 14, a daughter, Dorothy Louise, to Dr. and Mrs. Charles Newhouse. Mrs. Newhouse was Millie Milmo, class of 1919, Pittsburgh Hospital, Pittsburgh, Pa.

On May 16, a daughter, Virginia, to Mr. and Mrs. George Mitchell, of Frankfort, N. Y., Mrs. Mitchell is a graduate of Frederick Ferris Thompson Hospital, Canandaigua, N. Y.

On May 9, a son, to Mr. and Mrs. Clarence Benham, of Rochester, N. Y. Mrs. Benham is a graduate of the Frederick Ferris Thompson Hospital, Canandaigua, N. Y.

Recently, a son, Francis Alexander, to Mr. and Mrs. Alexander Kennedy. Mrs. Kennedy was Mayme Walsh, class of 1917, St. Mary's Hospital, Chicago, Ill.

On May 9, a son, to Dr. and Mrs. J. W. Hallberg. Mrs. Hallberg was Nina Erickson, class of 1911, General Hospital, Kansas City, Mo.

Recently, in Detroit, Michigan, a son, to Dr. and Mrs. A. J. Newman. Mrs. Newman was Nancy O'Hagan, graduate of Francis Willard Hospital, and later night supervisor of Washington Boulevard Hospital, Chicago, Ill.

On April 17, in Seymour, Iowa, a son, Russel Thorp, to Mr. and Mrs. Roscoe Phillips. Mrs. Phillips was Ethel Thorp, class of 1916, St. Johns Hospital, St. Louis, Mo.

Recently, in Alden, Minn., a daughter, to Mr. and Mrs. Alvin Connor. Mrs. Connor was Edna Nelson, class of 1917, Mercy Hospital, Cedar Rapids, Iowa.

Recently, in Randolph, Neb., a daughter, to Mr. and Mrs. A. N. Bisenius. Mrs. Bisenius was Opal Collins, class of 1916, Mercy Hospital, Cedar Rapids, Iowa.

Recently, in Spellville, a son, to Mr. and Mrs. Ben Novak. Mrs. Novak was Stella Klemish, class of 1912, Mercy Hospital, Cedar Rapids, Iowa.

Recently, in Des Moines, a son, to Mr. and Mrs. Wadell. Mrs. Wadell was Isabelle McGee, class of 1917, Mercy Hospital, Cedar Rapids, Iowa.

Recently, in St. Paul, Minn., a son, to Mr. and Mrs. A. R. Bleckinger. Mrs. Bleckinger was Ella V. Lyons, class of 1907, Mercy Hospital, Cedar Rapids, Iowa.

On April 9, in Ogdensburg, N. Y., a son, Robert Lee, to Mr. and Mrs. Lee Keyes. Mrs. Keyes was Jennie Cummings, class of 1919, St. Lawrence State Hospital, Ogdensburg, N. Y.

On April 14, in Newark, N. J., a daughter, Anna E., to Dr. and Mrs. William M. Gober. Mrs. Gober was Grace Morehouse, class of 1917, Methodist Episcopal Hospital, Brooklyn, N. Y.

Recently, a daughter, Mary Frances, to Mr. and Mrs. W. A. Broyles. Mrs.

Broyles was Martha Sue Pigg, class of 1916, Stuart Circle Hospital, Richmond, Va.

Recently, a daughter, to Dr. and Mrs. Henry E. Alburger. Mrs. Alburger was Mary Littlefield, class of 1910, St. Vincent's Hospital, Indianapolis, Ind.

On May 25, a son, to Mr. and Mrs. W. J. Robinson. Mrs. Robinson was Mae Buck, class of 1918, Samaritan Hospital, Troy, N. Y.

On June 6, a son, to Mr. and Mrs. John Newland, of Cohoes, N. Y. Mrs. Newland was Gertrude Frye, class of 1918, Samaritan Hospital, Troy, N. Y.

On June 4, a son, to Mr. and Mrs. E. Wahlen. Mrs. Wahlen was Miss Leones, class of 1919, Grant Hospital, Chicago.

On April 26, in Pittsburgh, Pa., a daughter, to Mr. and Mrs. Gommersal. Mr. and Mrs. Gommersal are graduates of St. John's Hospital, Pittsburgh.

On May 9, a son, to Mr. and Mrs. John Shenkel, of Pittsburgh, Pa. Mrs. Shenkel was a member of class of 1918, St. John's Hospital, Pittsburgh, Pa.

On April 20, in New York City, a daughter, to Mr. and Mrs. Edward W. Pease. Mrs. Pease was Hermine Schweers.

On January 29, in Armstrong, British Columbia, a daughter, Elaine Mary, to Mr. and Mrs. J. B. Munro. Mrs. Munro was Frances Eldridge, class of 1918, Newark City Hospital, Newark, N. J.

On April 16, a son, to Mr. and Mrs. Nelson. Mrs. Nelson was Frieda Seeligman, class of 1919, Lebanon Hospital, New York.

On April 16, a son, to Mr. and Mrs. Lichtenberg. Mrs. Lichtenberg was Regina Steinberg, class of 1915, Lebanon Hospital, New York City.

MARRIAGES

On April 26, Lillian Yunker, class of 1919, Christ Hospital, Cincinnati, Ohio, to Robert Olney, M.D. Dr. and Mrs. Olney will live in Lincoln, Neb.

On April 30, Hazel Runyan, class of 1915, Christ Hospital, Cincinnati, Ohio, to James Sexson. Mr. and Mrs. Sexson will live in Phoenix, Arizona.

On May 3, Minnie Sweet, class of 1908, Samaritan Hospital, Troy, N. Y., to William Smith, of Petersburg, N. Y.

Recently, Laura Waincott, class of 1914, Bloomington City Hospital, Bloomington, Ind., to W. B. Bishop, M.D. Dr. and Mrs. Bishop will live in Anderson, Ind.

On April 30, in Indianapolis, Ind., Bees Rhea, class of 1914, Eastman Hospital, to Howard Logan. Mr. and Mrs. Logan will live in Indianapolis.

On May 5, in Franklin, Ind., Mabel Baker, class of 1916, Indianapolis City Hospital, to Charles Owen. Mrs. Owen was president of her alumnae association and has been doing school nursing for the past two years. Mr. and Mrs. Owen will live in Indianapolis.

Recently, in Indianapolis, Ind., Mary C. White, class of 1919, Indianapolis City Hospital, to Harry Perkins. Mr. and Mrs. Perkins will live in Indianapolis.

On June 14, in Quincy, Ill., Viola Ketzler, class of 1921, St. John's Hospital, St. Louis, Mo., to George Schmits. Mr. and Mrs. Schmits will live in Kansas City, Mo.

On June 14, in Kewanee, Illinois, Sara Hazel Eberle, class of 1919, St. Francis Hospital, to Lester Dean Bacoran. Mr. and Mrs. Bacoran will live in Milwaukee, Wis.

On April 2, Margaret Louise Brems, class of 1916, Farrand Training School, Harper Hospital, Detroit, Mich., to Charles F. Bloom, M.D. Dr. and Mrs. Bloom will live in Bend, Ore.

On April 1, in Oregon City, Ore., Ruby Emery, class of 1912, Good Samaritan Hospital, Portland, Ore., to Harry Buckle.

On March 30, Julia White, class of 1906, Rhode Island Hospital, to Stephen M. Aylsworth. Mr. and Mrs. Aylsworth will live in Dalton, Pa.

On April 30, in Harrisburg, Pa., Charlotte G. Guisrivate, class of 1913, St. Luke's Hospital, Philadelphia, Pa., to Caspar Smith. Mr. and Mrs. Smith will live in Philadelphia.

On May 4, in Pittsburgh, Pa., Elizabeth U. Ratajiwski, class of 1919, Pittsburgh Hospital, Pittsburgh, Pa., to Adam Woleyrz, M.D. Dr. and Mrs. Woleyrz will live in Pittsburgh.

On June 1, in Pittsburgh, Catherine J. McQuade, class of 1913, Pittsburgh Hospital, Pittsburgh, Pa., to Charles Dutton Terry. Miss McQuade served overseas for seventeen months during the war. Mr. and Mrs. Terry will live in Pittsburgh.

Recently, Madeline Thomas, class of 1921, Passaic General Hospital, Passaic, N. J., to George Kerr.

On June 7, Marie Steenland, class of 1920, Passaic General Hospital, Passaic, N. J., to Joseph P. Fitting. Mr. and Mrs. Fitting will live in Nutley, N. J.

On June 9, Anna Nelson, class of 1920, Passaic General Hospital, Passaic, N. J., to Robert Fleming. Mr. and Mrs. Fleming will live in Clifton, N. J.

Recently, Florence Dutton, class of 1914, Christ Hospital, Topeka, Kansas, to Frank Morris. Mr. and Mrs. Morris will live near Delia, Kansas.

Recently, Mildred Mulets, class of 1905, Christ Hospital, Topeka, Kansas, to Edgar Metcalf. Mr. and Mrs. Metcalf will live in Wellington, Kansas.

On June 1, in South Pasadena, Calif., Laura Frances Reichenbach, class of 1912, Lankenau Hospital, Philadelphia, Pa., to Herbert Green.

Recently, in Troy, Louise Leffler, class of 1909, Troy Hospital, Troy, Pa., to J. Hart, M.D., of Cambridge, Mass.

On June 1, in Upper Montclair, N. J., Mrs. Elizabeth Driscoll, class of 1911, Suburban General Hospital, Bellevue, Pa., to W. J. K. Snyder, M.D. Mrs. Driscoll was superintendent of the Bellevue Hospital. Dr. and Mrs. Snyder will live in Avalon, Pa.

On June 4, in Boston, Helen Monroe, graduate of Massachusetts Homeopathic Hospital, Boston, Mass., to George Roberts.

On May 11, Helene Anderson, class of 1918, Massachusetts Homeopathic Hospital, Boston, Mass., to George Young. Mr. and Mrs. Young will live in Plymouth, Mass.

On April 29, in St. John, N. B., Jean Clark, class of 1918, Massachusetts Homeopathic Hospital, Boston, Mass., to Stanley Nason.

On March 10, in Omaha, Nebraska, Luella Larsen, class of 1912, Clarkson Memorial Hospital, Omaha, to John G. Baisch, U.S.N. Lieutenant and Mrs. Baisch will live in Los Angeles, Calif.

Recently, Marguerite West, class of 1919, State Hospital, Scranton, Pa., to Nicholas Delino. Mr. and Mrs. Delino will live in Tucson, Arizona.

On March 26, in Globe, Ariz., Mrs. Jessie Vaughn Van Sickle, graduate of Mayfield Sanitarium, St. Louis, Mo., to Kelley William Hulbart. Mr. and Mrs. Hulbart will live in Arizona.

On May 3, in St. Lucia, British West Indies, Edith G. St. Aubyn, class of 1920, Chester Hospital, Chester, Pa., to Fitzgerald Floissac, of St. Lucia.

On April 16, in Muncie, Ind., Agnes W. Hoffman, class of 1920, Hartford

Hospital, Hartford, Conn., to Wallace E. Stuart. Mr. and Mrs. Stuart will live in Pittsburgh, Pa.

Recently, Laura Sophis Aadland, class of 1916, St. John's Hospital, Sioux City, Iowa, to L. M. Johnson. Mr. and Mrs. Johnson live in Sioux City.

Recently, Marie Georgianna Allo, class of 1917, St. Mary's Hospital, Green Bay, Wis., to G. W. Lewis. Mr. and Mrs. Lewis will live in Racine, Wis.

Recently, Gladys Catherine Peterson, class of 1915, St. Joseph's Hospital, Sioux City, Iowa, to Henry Metz, Jr. Mr. and Mrs. Metz live in Sioux City.

Recently, Laura Annie Ponto, class of 1919, Iowa State University Hospital Training School, Iowa City, Iowa, to Mr. Foster. Mr. and Mrs. Foster live in Wellman, Iowa.

Recently, Florence Edna Prouty, class of 1915, Columbia Hospital, Milwaukee, Wis., to Mr. Kissling. Mr. and Mrs. Kissling live in Milwaukee, Wis.

Recently, Mrs. Meta V. Priseler, class of 1914, Ayburn Memorial Hospital, Ottawa, Ill., to Mr. Irion. Mr. and Mrs. Irion live in Ottawa, Illinois.

Recently, Florence Eads Randall, class of 1916, John C. Proctor Hospital, Peoria, Ill., to Mr. Pravitz. Mr. and Mrs. Pravitz live in Cisco, Texas.

Recently, Ruth Winifred Haskins, to Mr. Hill. Mr. and Mrs. Hill live in San Pedro, California.

Recently, Esther Vionna Hawkins, class of 1918, Springfield Hospital, Springfield, Ill., to Mr. Petersen. Mr. and Mrs. Petersen live in Salt Creek, Wyoming.

Recently, Hope M. S. Hinds to Mr. Runde. Mr. and Mrs. Runde live in Washington, D. C.

Recently, Selma Paula Hoppe, class of 1916, Rockford Hospital, Rockford, Ill., to Mr. Mosby. Mr. and Mrs. Mosby live in Rockford, Ill.

Recently, Mary Elizabeth Libbie Howe to Mr. Hancock. Mr. and Mrs. Hancock live in Atlanta, Ga.

Recently, Anne Johnson to Mr. Englerth. Mr. and Mrs. Englerth live in North Judson, Ind.

Recently, Tillie Inga Nelson, class of 1917, Mercy Hospital, Denver, Colo., to Walter Molis. Mr. and Mrs. Molis live in Muscatine, Iowa.

Recently, Geneva L. Nifong to Mr. Marinus. Mr. and Mrs. Marinus live in Memphis, Tenn.

Recently, Kathryn Norton, class of 1913, Mercy Hospital, Waverly, Iowa, to Mr. Carter. Mr. and Mrs. Carter live in Shellrock, Iowa.

Recently, Alma M. C. Larsen, class of 1916, Bethesda Hospital, St. Paul, Minn., to Mr. Dillan. Mr. and Mrs. Dillan live in Waupaca, Wis.

Recently, Blanche Eugenie Lawler, class of 1913, Michael Reese Hospital, Chicago, Ill., to F. H. Lamb. Mr. and Mrs. Lamb live in Davenport, Iowa.

Recently, Mary Agnes Lonergan, class of 1921, Rockford Hospital, Rockford, Ill., to Mr. Curran. Mr. and Mrs. Curran live in Rockford, Ill.

Mabel Gladys Marker, class of 1918, Garfield Park Hospital, Chicago, Ill., to Mr. Kaley. Mr. and Mrs. Kaley live in Chicago, Ill.

Recently, Elsie Alma Fischer, class of 1914, Trinity Hospital, Milwaukee, Wisconsin, to Waldo G. Hedges. Mr. and Mrs. Hedges live in Daniel, Wyo.

Recently, Anna Elizabeth Freund, class of 1911, James River Valley Hospital, Edgeley, North Dakota, to Mr. Mellin. Mr. and Mrs. Mellin will live in Des Moines, Iowa.

Recently, Annabelle Dorothy Frey, class of 1907, Harrisburgh City Hospital, Harrisburgh, Pa., to Charles F. Ball. Mr. and Mrs. Ball live in Gillette, Wyo.

Recently, Rose Betty Greinke, class of 1918, Mt. Sinai Hospital, Milwaukee, Wis., to Mr. Dite. Mr. and Mrs. Dite live in Milwaukee, Wis.

Recently, Helen Frances Baird, class of 1914, Woodland Hospital, Moberly, Mo., to Mr. Rapuzzi. Mr. and Mrs. Rapuzzi live in Abingdon, Ill.

Recently, Amanda Jane Baker, class of 1916, Olney Sanatorium, Olney, Ill., to Mr. Benefiel. Mr. and Mrs. Benefiel live in Lawrenceville, Ill.

Recently, Mrs. Ula Settersten Baker, class of 1908, Sherman Hospital, Elgin, Ill., to Mr. Cowles. Mr. and Mrs. Cowles live in Cambridge, Wis.

Recently, I. Bethel Beals, class of 1917, University Homeopathic Hospital, Iowa City, Iowa, to Mr. Blackmar. Mr. and Mrs. Blackmar live in Iowa City, Iowa.

Recently, Bertha Mae Beeman, class of 1918, St. Louis City Hospital, St. Louis, Mo., to Mr. Bauman. Mr. and Mrs. Bauman will live in Honolulu, Hawaiian Islands.

Recently, Mary Clare Brown, class of 1914, St. Mary's Hospital, Racine, Wis., to Mr. Olson. Mr. and Mrs. Olson live in New London, Wis.

Recently, Harriet M. Tucker to Mr. Snell. Mr. and Mrs. Snell live in Cleveland, Ohio.

Recently, Erna M. Vollert, class of 1917, St. Mary's Hospital, Milwaukee, Wis., to Mr. Wittrock. Mr. and Mrs. Wittrock live in Manitowoc, Wis.

Recently, Annette Margaret Walsh, class of 1915, St. Joseph's Hospital, Milwaukee, Wis., to Edward F. Doherty. Mr. and Mrs. Doherty live in Wilwaukee, Wis.

Mamie Lydia Hyde to M. E. Kienle. Mr. and Mrs. Kienle will live in Newberg, Ore.

Recently, Stella Klemish, class of 1913, Mercy Hospital, Cedar Rapids, Iowa, to Mr. Novak. Mr. and Mrs. Novak are living in Spillville, Iowa.

Recently, Blanch Klund to Mr. Steigerwald. Mr. and Mrs. Steigerwald live in Elyria, Ohio.

Recently, Carolyn M. Schertz, class of 1914, Brokaw Hospital Training School, Normal, Ill., to William Geneva. Mr. and Mrs. Geneva live in McLean, Ill.

Recently, Caroline Schneider, class of 1915, University of Iowa Hospital Training School, Iowa City, Iowa, to Mr. Berry. Mr. and Mrs. Berry live in Iowa City.

Recently, Viola Marie Smith, to Mat Brown. Mr. and Mrs. Brown live in Long Beach, Calif.

Recently, Mary Vail Staples, class of 1911, Rutland Hospital, Rutland, Vt., to John L. Davies. Mr. and Mrs. Davies live in Dixon, Ill.

Recently, in Jacksonville, Ill., Ella Stratton, class of 1918, Passavant Memorial Hospital, Jacksonville, Ill., to Rudolph Johnson. Mr. and Mrs. Johnson live in Kansas City.

On February 19, in Portland, Ore., Ruth B. Young, class of 1919, Johns Hopkins Hospital, Baltimore, Md., to Morris Gould. Mr. and Mrs. Gould will live in Illinois.

Recently, Viva E. Westerdahl, class of 1914, St. Vincent's Hospital, Sioux City, Iowa, to Mr. Laufesik. Mr. and Mrs. Laufesik live in Chicago, Ill.

Recently, Sylvia Jane Wilson, class of 1917, Olney Sanatorium Training School, Olney, Ill., to Eugene R. Wiseman. Mr. and Mrs. Wiseman live in Pittsburgh, Pa.

Recently Mary Elise Eastby, to Mr. Henricks. Mr. and Mrs. Henricks live in Cleveland, Ohio.

Recently, Elizabeth Mary Campbell to Mr. Sempert. Mr. and Mrs. Sempert live in Benton Harbor, Michigan.

Recently, Myrtle Golden Chapman to Vance Moore. Mr. and Mrs. Moore will live in Imperial, Calif.

Recently, Gerda H. Clausen, class of 1918, Milwaukee Hospital, Mobridge, South Dakota, to Mr. Bentz. Mr. and Mrs. Bentz will live in Trail City, South Dakota.

Recently, Mary Ellen Kenny, class of 1913, St. Luke's Hospital, Aberdeen, South Dakota, to Mr. Kuni. Mr. and Mrs. Kuni live in Aberdeen, S. D.

Recently, Hazel May Brown, class of 1912, St. Mary's Infirmary, Galveston, Texas, to Mr. Cobb. Mr. and Mrs. Cobb live in Peoria, Ill.

Olivia A. Johnson, to Mr. Todd. Mr. and Mrs. Todd are living in Iron Mountain, Mich.

Recently, Audrey Jones, class of 1913, Mt. Sinai Hospital, Milwaukee, Wis., to Mr. Neilson. Mr. and Mrs. Neilson live in Milwaukee, Wis.

Recently, Agnes F. Joynt, class of 1913, Mercy Hospital, Davenport, Iowa, to Joe Heisler. Mr. and Mrs. Heisler live in Farley, Iowa.

On April 14, Virginia Sherman, class of 1917, Methodist Episcopal Hospital, Brooklyn, N. Y., to Raymond Grey Hudson. Mr. and Mrs. Hudson will live in Rochester, N. Y.

Recently, in Tucson, Ariz., Clara McReynolds, graduate of Methodist Hospital, Des Moines, Iowa, to Otis L. Snedeker. Mr. and Mrs. Snedeker will live in Phoenix.

On April 14, in Springfield, Mo., Ruth J. Smithmier, class of 1911, Glockner Hospital, Colorado Springs, Colo., to Joseph M. Milet. Mr. and Mrs. Milet will live in Detroit, Mich.

On April 12, Mary B. Waddell, class of 1919, Maryland General Hospital, Baltimore, Md., to Fred H. Clark, M.D. Dr. and Mrs. Clark will live in Baltimore.

On May 26, in Philadelphia, Pa., Edith H. Schafitz, class of 1913, Mt. Sinai Hospital, Philadelphia, Pa., to Henry O. Sloane, M.D. Dr. and Mrs. Sloane will live in Philadelphia.

On March 30, in Camp Cody, New Mexico, Mary Callahan, class of 1915, St. John's Hospital, St. Louis, Mo., to Cecil Johnson. Both were in service. Mr. and Mrs. Johnson will live in Oakland, Calif.

Recently, at Springfield, Ill., Clara Austin, class of 1919, Passavant Memorial Hospital, Jacksonville, Ill., to Walter Komerski. Mr. and Mrs. Komerski live in Springfield, Ill.

On May 21, in Fort Worth, Texas, Mary Malone, class of 1908, St. Joseph's Infirmary, Fort Worth, Texas, to M. C. Tidwell. Mr. and Mrs. Tidwell will live in Fort Worth.

On June 1, Anne Belkin, class of 1914, Methodist Episcopal Hospital, Brooklyn, N. Y., to Fred Kempt. Mr. and Mrs. Kempt will live in Norwood, Ontario, Canada.

On May 7, Agnes Olson, class of 1917, Grant Hospital, Chicago, Ill., to Fred Wieland. Mr. and Mrs. Wieland will live in Chicago.

On June 8, in Boston, Mass., Florence B. Finlayson, class of 1910, Massachusetts Women's Hospital, Boston, Mass., to Charles M. Nelson. Mr. and Mrs. Nelson will live in Boston.

On April 15, in Portland, Ore., Marie Saary, class of 1919, Presbyterian Hospital, Chicago, Ill., to Hugh T. Friedell, M.D. Dr. and Mrs. Friedell will live in Santa Barbara, Calif.

On February 19, in Portland, Ore., Ruth B. Young, class of 1919, Johns Hopkins Hospital, Baltimore, to Morris Gould. Mr. and Mrs. Gould will live in Illinois.

Recently, Elsie Shortledge, class of 1918, Children's Homeopathic Hospital, Philadelphia, Pa., to Mr. MacArthur. Mrs. MacArthur served in Camp Gordon during the war.

On March 1, Helen Jackson, class of 1918, Presbyterian Hospital School of Nursing, New York City, to Edward Redvers Kerrington Collins. Mr. and Mrs. Collins will live in Matubatuba, Zululand, Natal, South Africa.

On February 12, in Bethlehem, Pa., Louise Meyers, class of 1920, Presbyterian Hospital, New York City, to Lloyd Bachman Jones. Mr. and Mrs. Jones will live in Bethlehem.

Recently, in New York City, Frances Goodman, graduate of Kings County Hospital, Brooklyn, N. Y., to A. B. Pemsler, M.D. Dr. and Mrs. Pemsler live in New York City.

On May 25, in New York City, Catherine M. Gildea, class of 1912, Frankford Hospital, Philadelphia, Pa., to William Alyn Seifert. Mr. and Mrs. Seifert will live in New York City.

DEATHS

On May 5, at the Ohio Valley General Hospital, Wheeling, Va., Mrs. Estelle Trusler Backman. Mrs. Backman served overseas during the World War.

On June 3, in Rochester, N. Y., following a long illness, Mrs. Warren Wooden. Mrs. Wooden was Grace May Willoughby, class of 1915, Rochester General Hospital, Rochester, N. Y. Mrs. Wooden leaves a host of friends to mourn her loss.

On April 1, in Denver, Colo., following a brief illness, Mrs. E. H. Crawley, formerly Esther Fisher, class of 1918, Wise Memorial Hospital, Omaha, Neb. Her charming personality made for her a host of friends who feel keenly the loss sustained in her death.

On May 11, in the Roxborough Hospital, Roxborough, Pa., Mrs. Dorothy V. Jamison. Mrs. Jamison was Dorothy V. Guilford, a graduate of Montgomery Hospital Training School, Norristown, Pa. She was a supervisor in the operating room of that hospital until her marriage. She leaves many friends who mourn the great loss felt in her death.

On February 8, in Baltimore, Md., following a lingering illness, Katharine Watkins, class of 1896, University Hospital, Baltimore, Md.

Recently, in St. Paul, Minn., Dorcas K. Edgerton, a graduate of the Massachusetts Homeopathic Hospital, Boston, Mass.

On May 3, in Monroe, Mich., Mrs. William F. Acker, graduate of Farrand Training School for Nurses, Harper Hospital, Detroit, Mich. She was an active member of the First District Association of Michigan and was a director of that association for one year. She was also an enrolled Red Cross nurse. Mrs. Acker was held in highest esteem by all who knew her, and her loss will be greatly felt.

On May 4, in Cowansville, Pa., Mrs. Annabel Ralston, class of 1911, Suburban General Hospital, Bellevue, Pa.

On April 2, in Brooklyn, N. Y., Emogene Pearn, class of 1895, Brooklyn Homeopathic Hospital. Miss Pearn conducted a school for destitute children in Brooklyn for many years. She contracted pneumonia last February, from which she never recovered.

On April 10, in New York, Eleanor F. Blackstone, formerly of Philadelphia. Miss Blackstone was decorated twice for her work during the war. She went to

France in 1917 with the American unit of the Pennsylvania Hospital. Her death was due to scarlet fever, which she contracted from a patient for whom she was caring.

On May 25, in Kansas City, Mo., Emma Marchlewsky, class of 1920, Grace Hospital, Kansas City. Her body was sent back to her parents in Alsace-Lorraine. Miss Marchlewsky was much loved by all.

In February, Eva Dufresne, of Watervliet, N. Y., a graduate of the Troy Hospital, Troy, N. Y.

On May 29, at the Central Club for Nurses, New York, of heart failure, Elizabeth M. Burns, graduate of the Roosevelt Hospital. Miss Burns had known for some time that the end might come suddenly. She had been to church on Sunday morning and had had communion. In the afternoon, after an illness of only forty-five minutes, life was ended. Miss Burns was an active member in alumnae, district, state and national associations,—she was an active, devoted worker with a most forceful personality, and she will be sadly missed. She was a charter member of her alumnae and one of its most honored and useful members. She was its first secretary and was later its president and then a trustee. She had been a member of the Red Cross Committee of the district. Her breadth of interest in all phases of nursing work has been a source of inspiration to her associates, while her unfailing interest, her powers of leadership and her wise counsel were always at their service. Miss Burns had been closely connected with nursing affairs in New Jersey through her work as an industrial nurse at the Ladew Tannery Company of Newark. She was an ardent champion of industrial betterment. She had more than once been around the world with the Ladew family and had visited every known country but two. She had nursed cholera patients at Gibraltar and was one of those rescued from the *Titanic*. Her many friends will miss her greatly.

On April 16, Mrs. Dita Hopkins Kinney. Mrs. Kinney was born in New York City but was brought up in California, where she graduated from Mills Seminary, now Mills College, and taught until her marriage to Mark H. Kinney of New York. Her husband's early death left her a young widow with a child to support. She graduated from the Massachusetts General Hospital in 1891, after which she was employed by an educational society to train young women as attendants. Mrs. Kinney later returned to California and during the Spanish War served in the Army Hospital, at Presidio. She was appointed Chief Nurse at Fort Bayard, N. M., in October, 1900, and in December of that year she was assigned to duty in the office of Surgeon General Sternberg in Washington. She was appointed Superintendent of the Army Nurse Corps in March, 1901, holding the position until July, 1909. As the Spanish War had shown lack of organization among army nurses, Mrs. Kinney's early duties were to carry reform and constructive work to army hospitals all over this country and in the Philippines. These early efforts helped to lay the foundations on which the later work of the Army Nurse Corps was built. After leaving the Army, Mrs. Kinney took post-graduate work at the Massachusetts General and was later superintendent of a hospital in Gloucester, Mass., until in 1914, her breaking health forbade exertion. During the recent war she taught Red Cross Classes in Home Nursing and also taught in the hospital of the town where she lived. Mrs. Kinney combined a sense of humor with high intelligence and a power of faithful, conscientious work.

TRIBUTE TO THE MEMORY OF SOPHIA F. PALMER

From the National Committee on Red Cross Nursing Service:

Whereas, since the last meeting of the Committee on Red Cross Nursing Service we have lost from our number Sophia F. Palmer, Editor-in-Chief of the American Journal of Nursing;

Be it resolved, that this Committee go on record as attempting to express its gratitude for and appreciation of the years of struggle in the successful endeavor to establish and maintain a journal worthy of best traditions and great future of our profession and of value and long continued assistance in developing the Nursing Service of the American Red Cross.

BOOK REVIEWS

GRACE H. CAMERON, R.N., DEPARTMENT EDITOR

MATERIA MEDICA, PHARMACOLOGY, AND THERAPEUTICS FOR NURSES.

By Amy Elizabeth Pope, R.N. W. B. Saunders Company, Philadelphia and London. Price, \$2.50.

Miss Pope is a well known teacher and educator in the nursing world and has many excellent textbooks for nurses to her credit. This new book will be welcomed by instructors because of the arrangement which lends itself specially to the limitations of the nurse who must know the drug, its dose and effect, rather than the therapeutic reason for its use. Each drug is listed and studied under the heading by which its chief effect is obtained. There is, therefore, less confusion in the study and a greater facility for reference. It is written in a compact and concise style, telling only what the student needs to know. There should be a large demand for this book.

TEXTBOOK OF NURSING PROCEDURES. By Anna C. Jammé, R.N. The Macmillan Company, New York City. Price, \$1.50.

From a wide experience the author has collected this series of demonstrations for the preliminary work of the student nurse. It is intended to be used in connection with a nursing manual as here are given only the lists of articles required for the treatment and a brief detail of preparation and procedure. A very complete list of the equipment needed for the demonstration room is given. Numerous instructive illustrations are from photographs taken in the San Francisco Hospital.

A PRIMER FOR DIABETIC PATIENTS. A BRIEF OUTLINE OF THE PRINCIPLES OF DIABETIC TREATMENT, SAMPLE MENUS, RECIPES AND FOOD TABLES. By Russel M. Wilder, Ph.D., M.D.,—Mary A. Foley, Dietitian,—Daisy Ellithorpe, Dietitian. W. B. Saunders Company, Philadelphia and London. Price, \$1.50.

A brief outline of dietary treatment of diabetes used for the instruction of patients at the Mayo Clinic.

SONGS OF A RED CROSS NURSE. By Brookes More. Published by The Cornhill Company, Boston. Price, \$1.35.

This little book of verse has proved exceedingly popular. There is a swing and lilt to the lines that appeal to one. The verses seem to trip along without effort. It has been classed as "real war poems for real men."

OFFICIAL DIRECTORY

Headquarters National Nursing Associations.—370 Seventh Avenue, New York City. Office Director, R. Inde Albaugh, R.N.

The American Journal of Nursing Company.—President, S. Lillian Clayton, R.N., Philadelphia General Hospital, Philadelphia, Pa. Secretary, Elsie M. Lawler, R.N., Johns Hopkins Hospital, Baltimore, Md. Editorial Office, 19 West Main Street, Rochester, N. Y.

The American Nurses' Association.—President, Clara D. Noyes, R.N., 1726 M. Street, N. W., Washington, D. C. Secretary, Katharine DeWitt, R.N., 19 West Main Street, Rochester, N. Y. Treasurer, Mrs. C. V. Twiss, R.N., 14 East 50th Street, New York, N. Y. Sections: Private Duty, Chairman, Frances M. Ott, R.N., Morocco, Ind. Mental Hygiene, Chairman, Elnora E. Thomson, R.N., School of Social Work, Portland, Ore. Legislation, Chairman, Roberta M. West, R.N., Room 150, 34 S. 17th Street, Philadelphia, Pa. Committee on Revision, Chairman, Sarah E. Sly, R.N., Birmingham, Mich. Relief Fund Committee, Chairman, Elizabeth E. Golding, R.N., 317 West 45th Street, New York, N. Y. Treasurer, Mrs. C. V. Twiss, R.N., 14 East 50th Street, New York, N. Y.

The National League of Nursing Education.—President, Anna C. Jammé, R.N., 213 Lachman Building, San Francisco, Calif. Secretary, Martha M. Russell, R.N., University Hospital, Boulder, Colo. Treasurer, Bena M. Henderson, R.N., Children's Memorial Hospital, Chicago, Ill.

The National Organization for Public Health Nursing.—President, Elizabeth G. Fox, R.N., 2800 14th Street, N. W., Washington, D. C. Director, Florence M. Patterson, R.N., 370 Seventh Avenue, New York.

Isabel Hampton Robb Memorial Fund Committee.—Chairman, Elsie M. Lawler, R.N., Johns Hopkins Hospital, Baltimore, Md. Treasurer, Mary M. Riddle, R.N., Newton Hospital, Newton Lower Falls, Mass.

Director, Department of Nursing, American Red Cross.—Clara D. Noyes, R.N., Care American Red Cross, Washington, D. C.

Army Nurse Corps, U. S. A.—Superintendent, Julia C. Stimson, R.N., Surgeon General's Office, Army Nurse Corps Division, 7th and B Sts., War Department, Washington, D. C.

Navy Nurse Corps, U. S. N.—Superintendent, Lenah S. Higbee, M.L.A., R.N., Bureau of Medicine and Surgery, Department of the Navy, Washington, D. C.

U. S. Public Health Service Nurse Corps.—Superintendent, Lucy Minnigerode, R.N., Ohio Avenue and 15th Street, N. W., Washington, D. C.

Department of Nursing and Health, Teachers College, New York.—Director, M. Adelaide Nutting, R.N., Teachers College, Columbia University.

STATE ORGANIZATIONS OF NURSES

Alabama.—President, Eloise Schleund, R.N., Southern Infirmary, Mobile. Secretary, Catherine A. Moultrie, R.N., 1032 Elm Street, Birmingham. President examining board, Lemoyne Phares, R.N., Inge-Bondurant Sanitarium, Mobile. Secretary, Helen MacLean, R.N., 2430 North 11th Avenue, Birmingham.

Arizona.—President, Bertha C. Rowe, R.N., Anti-tuberculosis Association, Phoenix. Secretary, Kathryn MacKay, 304 North Church Street, Tucson.

Arkansas.—President, Ruth Riley, Fayetteville. Secretary, Annie Bremyer, R.N., El Dorado. President examining board, M. D. Ogden, M.D., Little Rock. Secretary-treasurer, Frankie Hutchinson, R.N., St. Vincent's Infirmary, Little Rock.

California.—President, Lillian L. White, R.N., 806 52d Street, Oakland. Secretary, Mrs. J. H. Taylor, R.N., R. B. 2, Galt. Director, Bureau of Registration of Nurses, Anna C. Jammé, R.N., 213 Lachman Building, San Francisco.

Colorado.—President, Mrs. Oca Cushman, R.N., Children's Hospital, Denver. Secretary, Jessie Stewart, 220 E. Yampa Street, Colorado Springs. President examining board, Mary B. Eyre, R.N., Minnequa Hospital, Pueblo. Secretary, Louise Perrin, R.N., 518 Kittredge Building, Denver.

Connecticut.—President, Harriet E. Gregory, R.N., 75 Elmwood Avenue, Waterbury. Secretary, Winifred LaFountaine, R.N., 760 Prospect Street, New Haven. President examining board, Martha F. Wilkinson, R.N., 34 Charter Oak Avenue, Hartford. Secretary, Miss Winifred A. Hart, R.N., 109 Rocton Avenue, Bridgeport.

Delaware.—President, Mary A. Moran, R.N., 1313 Clayton Street, Wilmington. Secretary, Anna W. Jones, R.N., 911 Delaware Avenue, Wilmington. President examining board, Frank E. Pierson, M.D., 1007 Jefferson Street, Wilmington. Secretary, Mary A. Moran, R.N., 1313 Clayton Street, Wilmington.

District of Columbia.—President, Ida F. Butler, R.N., American Red Cross, Washington. Secretary, Kathryn Hankins, Sibley Hospital, Washington. President examining board, Elizabeth G. Fox, R.N., 3800 14th St., N. W., Washington. Secretary-treasurer, Alice M. Prentiss, R.N., 1337 K Street, N. W., Washington.

Florida.—President, Lillian Hollohan, Morton F. Plant Hospital, Clearwater. Secretary, Mary D. Conoley, Morrell Memorial Hospital, Lakeland. President examining board, Anna L. Folting, R.N., Box 196, Miami. Secretary-treasurer, Mrs. Louisa B. Benham, Hawthorne.

Georgia.—President, Virginia P. Gibbs, R.N., County Board of Health, Marietta. Secretary, Chloe Jackson, R.N., 131 Capital Place, Atlanta. President examining board, Jane Van De Vrede, R.N., 464 North Boulevard, Atlanta. Secretary and treasurer, Jean Harrell, R.N., 110 Luckie Street, Atlanta.

Idaho.—President, Emma Amack, 1318 State Street, Boise. Secretary, Mabel Minear, 612 North 12th St., Boise. Department of Law Enforcement, Bureau of Licenses, Examiner, Napina Hanley, R.N., State Capitol.

Illinois.—President, Ada Belle McCleery, R.N., Evanston Hospital, Evanston. Secretary, Nellie M. Crissay, R.N., Hahnemann Hospital, Chicago. Superintendent of Registration, Fred C. Dodds, State Capitol, Springfield.

Indiana.—President, Mary E. Meyers, 1134 Pythian Building, Indianapolis. Secretary, Mrs. C. D. Fansler, R.P.O., Box 55, Indianapolis. President examining board, Mrs. M. P. Church, 301 W. Berry St., Ft. Wayne. Secretary, Edna Humphrey, R.N., 606 E. Market St., Crawfordsville.

Iowa.—President, Mary C. Haarer, Iowa State University Hospital, Iowa City. Secretary, Gyda Bates, R.N., 1527 Fourth Avenue, Cedar Rapids. President examining board, W. L. Bierring, M.D., Des Moines. Secretary, Guilford H. Sumner, M.D., Capitol Building, Des Moines.

Kansas.—President, Mrs. Alma R. O'Keefe, R.N., 1251 N. Lawrence Avenue, Wichita. Secretary, Sister Mary Helena, R.N., St. Barnabas Hospital, Salina. President examining board, E. J. Eason, R.N., Kansas City. Secretary-treasurer, Sister Mary Helena, R.N., St. Barnabas Hospital, Salina.

Kentucky.—President, Harriet Cleek, R.N., 148 Forest Ave., Lexington. Corresponding secretary, Anna H. Ryan, R.N., R. R. No. 8, Lexington. President examining board, Sophia F. Steinhauer, R.N., Speers Memorial Hospital, Dayton. Secretary, Flora E. Keen, R.N., Somerset.

Louisiana.—President, Mrs. J. E. Haley, 7925 Plum Street, New Orleans. Secretary, Mary C. Gillespie, Charity Hospital, New Orleans. President examining board, J. T. Crebbin, M.D., 1207 Maison Blanche Building, New Orleans. Secretary, J. S. Hebert, M.D., 1121 Maison Blanche Building, New Orleans.

Maine.—President, Margaret Dearness, Maine General Hospital, Portland. Secretary, Louise Hopkins, 246 Essex Street, Bangor. President examining board, Margaret M. Dearness, R.N., Maine General Hospital, Portland. Secretary-treasurer, Rachel A. Metcalfe, R.N., Central Maine General Hospital, Lewiston.

Maryland.—President, Elsie M. Lawler, R.N., Johns Hopkins Hospital, Baltimore. Secretary, Sarah F. Martin, R.N., 1211 Cathedral Street, Baltimore. President examining board, Helen C. Bartlett, R.N., 604 Reservoir Street, Baltimore. Secretary and treasurer, Mary Cary Packard, R.N., 1211 Cathedral Street, Baltimore.

Massachusetts.—President, Esther Dart, R.N., Stillman Infirmary, Cambridge. Corresponding secretary, Mary E. P. Davis, R.N., 19 Hoyle St., Norwood. President examining board, Mary M. Riddle, R.N., Newton Hospital, Newton Lower Falls. Secretary, Walter P. Bowers, M.D., State House, Boston.

Michigan.—President, Anna M. Schill, R.N., Hurley Hospital, Flint. Corresponding secretary, Elba L. Morse, Sandusky. President examining board, Reuben Petersen, M.D., Ann Arbor. Secretary, Mrs. Helen deSpelder Moore, R.N., Oakland Building, Lansing.

Minnesota.—President, Irene English, R.N., Northern Pacific Hospital, Brainerd. Secretary, Dora Cornelisen, Old State Capitol, St. Paul. President examining board, Jennette M. McLaren, M.D., 803 Lowry Building, St. Paul. Secretary, Dora Cornelisen, Old State Capitol, St. Paul.

Mississippi.—President, Bessie O. Brougher, Jackson. Secretary, Mrs. James A. Cameron, R.N., 515 Bay Street, Hattiesburg. President examining board, Dr. J. H. Fox, Jackson. Secretary-treasurer, Jane P. Cox, R.N., 708 Main Street, Natchez.

Missouri.—President, Mary G. Burman, Mercy Hospital, Kansas City. Secretary, Mrs. Emma C. Slack, R.N., 3031 Charlotte Street, Kansas City. President examining board, M. Anna Gillis, R.N., City Hospital, St. Louis. Secretary-treasurer, Helen Wood, R.N., 600 S. Kinghighway, St. Louis.

Montana.—President, Augusta E. Ariss, R.N., Deaconess Hospital, Great Falls. Secretary, Margaret Irish, R.N., 618 North 23rd Street, Billings. President examining board, E. Augusta Ariss, R.N., Deaconess Hospital, Great Falls. Secretary-treasurer, Frances Friedrichs, R.N., Box 928, Helena.

Nebraska.—President, Lulu Abbott, R.N., 847 North 26th Street, Lincoln. Secretary, Mrs. S. S. Miller, 4312 Pacific Street, Omaha. Bureau of Examining Boards, Secretary, H. H. Antles, Department of Public Welfare, State House, Lincoln.

Nevada.—President, Mary Evans, County Hospital, Reno. Secretary, Mrs. Fannie Doty, 41 West First Street, Reno.

New Hampshire.—President, Ida F. Shepard, R.N., Mary Hitchcock Hospital, Hanover. Secretary, Nora McQuade, R.N., 368 Lowell Street, Manchester. President examining board, Mrs. Susie McIntire, R.N., Morrison Hospital, Whitefield. Secretary, Ednah Cameron, R.N., 1 South State Street, Concord.

New Jersey.—President, Elizabeth J. Higbid, R.N., 449 Van Houten Street, Paterson. Secretary, Mrs. A. D. Pierson, R.N., 187 Watchung Avenue, West Orange. President examining board, Mary J. Stone, R.N., Room 302, McFadden Building, Hackensack. Secretary-treasurer, Elizabeth J. Higbid, R.N., Room 302, McFadden Building, Hackensack.

New York.—President, Alice Shepard Gilman, R.N., Samaritan Hospital, Troy. Secretary, Mrs. Julia W. Kline, R.N., 546 Rugby Road, Brooklyn. President examining board, Lydia E. Anderson, R.N., 461 Washington Avenue, Brooklyn. Secretary, Elizabeth C. Burgess, R.N., State Education Building, Albany.

North Carolina.—President, Mrs. Dorothy Hayden, Greensboro. Secretary, Carolyn J. Miller, R.N., 813 West Second Street, Winston-Salem. President examining board, Lois A. Toomer, R.N., 123 South 4th Street, Wilmington. Secretary-treasurer, Effie Cain, R.N., 1206 Fulton Street, Salisbury.

North Dakota.—President, Josephine Stennes, R.N., Good Samaritan Hospital, Rugby. Corresponding secretary, Esther Teichmann, R.N., 720 South 5th Street, Fargo. President examining board, Ethel Stanford, R.N., Grand Forks. Secretary, Mildred Clark, R.N., General Hospital, Devil's Lake.

Ohio.—President, Laura E. Logan, R.N., Cincinnati General Hospital, Cincinnati. Secretary, Rose K. Steinmetz, R.N., 96 Dick Street, Akron. Chief examiner, Ida May Hickox, R.N., State House, Columbus. Secretary, Dr. H. M. Platter.

Oklahoma.—President, Jessie Hammer, R.N., 4320 N. Western Street, Oklahoma City. Secretary, Lela Carr, 915 West 23d Street, Oklahoma City. President examining board, Idah Auten, R.N., Shawnee. Secretary-treasurer, Lela Carr, 915 West 23d Street, Oklahoma City.

Oregon.—President, Grace Phelps, R.N., 301 Platt Building, Portland. Secretary, Martha Randall, R.N., 514 Worcester Building, Portland. President examining board, Jane V. Doyle, R.N., 507 Gaseo Building, Portland. Secretary-treasurer, Mrs. O. E. Osborne, R.N., 512 Oakdale Avenue, Medford.

Pennsylvania.—President, Margaret A. Dunlop, R.N., Pennsylvania Hospital, Philadelphia. Secretary-treasurer, Williamina Duncan, R.N., 3440 Bates Street, Pittsburgh. President examining board, Albert M. Blackburn, M.D., 34 South 17th Street Philadelphia. Secretary-treasurer, Roberta M. West, R.N., 34 South 17th Street, Philadelphia.

Rhode Island.—President, Lucy C. Ayres, R.N., Woonsocket Hospital, Woonsocket. Corresponding secretary, Edith Barnard, 425 Broadway, Providence. President examining board, Henry C. Hall, M.D., Butler Hospital, Providence. Secretary-treasurer, Lucy C. Ayres, R.N., Woonsocket Hospital, Woonsocket.

South Carolina.—President, Jane H. Fraser, 1523 Richland Street, Columbia. Secretary, Laura Blackburn, R.N., 1121 Gervais Street, Columbia. Secretary, board of nurse examiners, A. Earl Booser, M.D., Columbia.

South Dakota.—President, Lillian Zimpher, R.N., Aberdeen. Corresponding secretary, Carrie E. Clift, R.N., Rapid City. President examining board, Clara S. Ingvalson, R.N., Flandreau. Secretary-treasurer, Mrs. Elizabeth Dryborough, R.N., Rapid City.

Tennessee.—President, Mrs. Dorsey T. Gould, R.N., 1305 Edgewood Place, Nashville. Secretary, Marie Peterson, R.N., 879 Madison Avenue, Memphis. President examining board, Willie M. McInnis, R.N., University of Tennessee, Memphis. Secretary-treasurer, Dr. Reese Patterson, Knoxville.

Texas.—President, Helen Holliday, Baylor Hospital, Dallas. Secretary, A. Louise Dietrich, R.N., 1001 E. Nevada Street, El Paso. President examining board, Agnes Hogg, R.N., Paris. Secretary, Eula Whitehouse, Houston Municipal Hospital, Houston, Texas.

Utah.—President, Mrs. N. F. W. Crossland, R.N., St. Mark's Hospital, Salt Lake City. Secretary, Alice Hubbard, R.N., Salt Lake County Hospital, Salt Lake City.

Vermont.—President, Elizabeth Van Patten, R.N., 433 S. Union Street, Burlington. Secretary, Mrs. Rose A. Lawler, Springfield. President examining board, Donley C. Hawley, M.D., Burlington. Secretary, Mary G. Kane, R.N., Montpelier.

Virginia.—President, Anne Gully, R.N., Leesburg. Secretary, L. L. Odom, R.N., Sarah Leigh Hospital, Norfolk. President examining board, Virginia Thacker, R.N., Lewis-Gale Hospital, Roanoke. Secretary-treasurer, Ethel Smith, R.N., Boissvain Avenue, Norfolk.

Washington.—President, Mrs. M. W. McKinney, R.N., 5502 14th Street, N. E., Seattle. Secretary, Katherine Major, R.N., King County Hospital, Seattle. President examining board, Mrs. Ella Harrison, R.N., 309 5th Avenue, Seattle. Secretary, Mae Mead, R.N., State Normal School, Bellingham.

West Virginia.—President, Mrs. Susan Cook, R.N., Lock Box 457, Wheeling; home address, Bridgeport, Ohio. Secretary-treasurer, Mrs. E. J. Bullard, R.N., Lock Box 457, Wheeling; home address, 510 Catawba Street, Martin's Ferry, Ohio. President examining board, Frank LeMoynes Hupp, M.D., Wheeling. Secretary, Anna M. Trimble, R.N., Huntington.

Wisconsin.—President, Mrs. H. E. Wolf, R.N., 234 South 10th Street, La Crosse. Secretary, Lavina Dietrickson, Forest Lawn Sanatorium, Jefferson. Treasurer, Margaret Pakenham, R.N., Milwaukee Downer College Infirmary, Milwaukee. President committee of examiners, Mrs. Mabel C. Bradshaw, R.N., 601 Marshall Street, Milwaukee. Secretary, Mrs. Harriet H. MacCormack, Whitehall.

Wyoming.—President, May Stanley, R.N., Rock Springs. Secretary, Etta Linn, R.N., Box 1125, Cheyenne. President examining board, S. J. McKenzie, R.N., St. John's Hospital, Cheyenne. Secretary, Mrs. H. C. Olsen, R.N., 605 East 21st Street, Cheyenne.

TERRITORIAL ASSOCIATION

Hawaii.—President, Janet Dewar, Children's Hospital, Honolulu. Secretary, Mabel L. Smyth, Palama Settlement, Honolulu.